JPRS-TEP-94-012 15 August 1994



JPRS Report—

Epidemiology

Epidemiology

JPRS-	TEP-94-012	CONTENTS	15 August	1994
AFRI	CA			
1	REGIONAL AFF	AIRS		
	Southern Afri	ca Health Report 26 Jun-3 Jul	***************************************	1
1	NIGERIA			
	Increase in D	rug-Resistant Malaria Causing Concern	***************************************	1
:	SOUTH AFRICA			
	Adult Cases of	f AIDS Doubles in One Year		2
	ZAMBIA			
	Meningitis O	utbreak in Ndola, Kitwe Reported	***************************************	3
	ZIMBABWE			
	Total Eradica Thirty Cattle	tion of Tsetse Now Possibility Deaths From Lumpy Skin in Midlands		3 4
CHIN	IA.			
	Over 1,300 A Public Health CHINA DAII Health Protect Official: Beiji China Makes Paper Analyze IV Drug User Genital Herpe Hepatitis B Si Study of Hepatitis C in China Still Fa Increase in Di Malaria on th Parasites Infe Parasitosis Sit First Dental C	ikely To Become China's Second Largest AIDS Epidemic area S With Herbal Medicine Said Successful IDS-Virus Infection Cases Reported Ministry Holds AIDS Seminar Y Article Warns About Spread of AIDS ing Taking 'Active Part' in Anti-AIDS Fight Efforts for AIDS Prevention, Control es HIV Occurrences s Show High Rates of HCV, HBV, HIV Infection es Rates in Different Professional Groups in Qingdao ludied in Seven Nationalities atitis C Infection Among Blood Donors 188 Cases of Childhood Non-A Non-B Hepatitis ces Threat of Bubonic Plague rug-Resistant Gonococcus e Increase in Henan ct Most of Nation's Population luation Remains Serious Care Foundation Set Up		6 6 8 8 9 9 10 10 10 11 11
EAST	ASIA			
1	REGIONAL AFF	AIRS		
		s Comment on Health Problems in Asian Tackling Regional Health Problems		

INDONESIA

	Twenty-One People Infected With HIV Forty-Eight AIDS-Infected Thai Fishermen Sent Home	14
,	JAPAN	
	Hospitals in Host Prefecture To Offer AIDS Care	1:
1	MALAYSIA	
	Rehabilitation Center Planned for HIV-Infected Prostitutes	13
	PHILIPPINES	
	Health Official Reports Seven AIDS Cases in Davao City Angeles City Official Reports 18 Cases of HIV Death Toll in Bicol Cholera Epidemic Reaches 46 Death Toll in Bicol Cholera Epidemic Reaches 58 Cholera Outbreak Affects 200 People in Cebu Epidemic Cholera Epidemic Kills 'At Least' 92 in Northern Samar Gastroenteritis Epidemic Reported in Davao	10 10 10 11
1	SINGAPORE	
	Health Ministry Reports 16 New HIV Carriers	18
,	THAILAND	
	Volunteers Start Trial of AIDS Vaccine AIDS Vaccine Tests Slated for Discontinuation Doctor To Continue AIDS Vaccine Tests AIDS Vaccine Volunteers Continue Despite Side Effect Rumors Official Reports Deaths Among Hmong Drug Addicts	19
,	VIETNAM	
	More HIV-Infected Cases Detected in Lam Dong 'Over 1,400' HIV Cases Reported Nationwide Dinh Quan District Halves Number of Malaria Cases Son La Province Faces 'Alarming' Malaria Situation	2
EAST	T EUROPE	
1	BULGARIA	
	Chief Epidemiologist Gives Figures on AIDS, Sexual Diseases Mandatory Diphtheria, Tetanus Vaccination Imposed Cases of Polio Among Romanies	22
	CZECH REPUBLIC	
	Article Analyzes AIDS, HIV Figures, Trends in Republic Number of Czech HIV Sufferers Rises to 190 in June Report Examines Reasons for Fall in Annual Death Rate	23
	YUGOSLAVIA	
	Infectious Diseases Spreading in Kosovo Sanctions Seen Jeopardizing Health	23

LATIN AMERICA

	REGIONAL AFFAIRS	
	Central American Health Report Through 1 July	24
	BOLIVIA	
	Church Group Releases Leishmaniasis Figures Incidence of Cholera Nationwide Decreases	24
	CUBA	
	AIDS Patients Total 1,046; 177 Deaths Recorded	26
	MEXICO	
	Mexican Health Report 17 June	26
NEA	AR EAST/SOUTH ASIA	
	ALGERIA	
	Annaba: Number of Typhoid Cases Up Dergana: 'Serious' Outbreak of Typhoid Reported	27
	INDIA	
	'Substantial Increase' in AIDS Cases; Northeast Hardest Hit Dysentery Outbreak Threatens To Wipe Out Pahadi Korba Tribe Some 296 New Cholera Cases Reported in Delhi	28
	PAKISTAN	
	Number of Cholera Deaths in Karachi Increases	28
	SRI LANKA	
	Estimated 6,000 People HIV-Positive, 125 Full-Blown AIDS Cases	28
CEN	NTRAL EURASIA	
	RUSSIA	
	Amendments to AIDS Prevention Law Considered Duma Health Official Releases AIDS Statistics Tajik Refugees Bring Risk of Lice-Borne Diseases to Yekaterinburg Incidence of Diphtheria Increasing in Russia Firm Proposes Clean Water Program for Russia Twelve Percent of Russian Schoolchildren Deemed Healthy Japan Donates Medical Equipment to Moscow Hospitals Radioactive Hazard Found in Moscow Hospital Diphtheria Incidence, Program Noted Incidence of Tuberculosis Rises Abruptly in Yaroslavl Oblast Mercury-Based Preparation Said Effective Against Cancers Duma Seeking 'Sensible Balance' in New AIDS Law Typhoid Outbreak in Northern Caucasus Region KAZAKHSTAN	30 30 31 31 32 33 33 33 34 35
	Twenty-Six Cases of HIV Infection Registered	36

LATVIA

Four Leptospirosis Deaths Reported in Riga This Year	36
MOLDOVA	
Cholera Case Reported in Moldova; First in 15 Years	37
TURKMENISTAN	
AIDS Center Chief Reports on Turkmenistan AIDS Program	37
UKRAINE	
National AIDS Committee Warns of HIV Threat	38
WEST EUROPE	
REGIONAL AFFAIRS	
EC Approves 10 New AIDS-Related Research Projects	39
GREECE	
AIDS Cases Rise to 916 Since 1984; 354 Already Dead	39
NORWAY	
'Abnormally Large' Number of Strep Cases Reported	40 40
UNITED KINGDOM	
More Details on Gloucester Virus Deaths Told Death Toll Rises From Necrotising Fasciitis Increase in Brain Tumor Research Needed	41

REGIONAL AFFAIRS

Southern Africa Health Report 26 Jun-3 Jul MB0307174994

[Editorial Report] The following is a compilation of reports monitored by FBIS Mbabane Bureau from 26 June to 3 July concerning outbreaks of and reports on various diseases. The items are listed by country and disease. The source follows each item.

Angola

Diarrhea, Measles—"More than 20 people have died of acute diarrhea and measles in two centers for wardisplaced people in the city of Benguela over the past few days. According to local sources, more than 4,000 children have been vaccinated against the diseases at the centers from 1-20 June." (Luanda TPA Television Network in Portuguese 1900 GMT 28 Jun 94)

Mozambique

TB—"According to a study carried out by the Health Ministry, out of every 100,000 people in the country, 95 have been infected with TB. A source from the Health Ministry told the MOZAMBIQUE INFORMATION AGENCY that many affected people die in the first 15 (?months) after the beginning of medical treatment, as a result of delays in coming to health centers. The source added that the number of detected cases does not reflect the magnitude of the disease, since the study was carried out only in the capital cities of the country's 10 provinces." (Maputo Radio Mozambique Network in Portuguese 0800 GMT 28 Jun 94)

Leprosy—"At least 2,000 Mozambicans are diagnosed annually as suffering from leprosy. Of this number, 1,500 are considered risky patients who can contaminate other people. A source from the Health Ministry told the MOZAMBIQUE INFORMATION AGENCY that the most affected provinces are Nampula, Cabo Delgado, Niassa, and Zambezia." (Maputo Radio Mozambique Network in Portuguese 1030 GMT 28 June 94)

South Africa

AIDS in Eastern Cape—"AIDS claimed the lives of 48 people, including nine babies, in the Eastern Cape this year in spite of the health department's increase in education campaigns about the epidemic....Only 27 people died of AIDS in the same period last year. There were also 439 reported cases of AIDS compared to last year's figure of 318." (Johannesburg SAPA in English 1752 GMT 28 Jun 94)

AIDS, TB—"Nearly half of the 3,357 reported AIDS cases in South Africa were in the economically-active 18-25 year age group, the director-general of national health, Dr Coen Slabber, said on Wednesday. Addressing the joint committee on finance, he said AIDS and tuberculosis were the major communicable diseases

which the department had to combat. Of the 3.357 cases nationally, 1,282 were in KwaZulu/Natal and 877 in the PWV [Pretoria, Witwatersrand, Vereeniging] region. Dr Slabber said a further 461 cases of AIDS in children under the age of four had also been identified." "The number of pregnant women testing HIV-positive throughout the country had grown from 1.49 percent in 1991 to 4.69 percent in November last year. Estimates put the number of HIV-positive pregnant women nationally at about 565,000. In the Western Cape, the number of HIV-positive women was about 1.33 percent while in KwaZulu/Natal, 9.69 percent—nearly one in every 10 women-tested positive, Dr Slabber said. The department's AIDS budget was R21,935 million [rands] in the current financial year. However, additional carry-over funds were available to supplement this amount." "The incidence of tuberculosis among the coloured community in the Western Cape was the highest in the world. More than 8,000 cases were reported in 1993." (Johannesburg SAPA English 1502 GMT 29 Jun 94)

Typhoid—"Typhoid has broken out in the Hankey District of the Eastern Cape, SABC Radio News reported on Friday. The four diagnosed cases are three children aged nine to 14 and a 19-year-old man. Algoa Regional Services Council director of health services Dr Jacques Snyman said the outbreak was under control and there was no cause for alarm. An immunisation programme under way would continue on Saturday." (Johannesburg SAPA in English 2005 GMT 01 Jul 94)

Zambia

Cholera—"There are fears that there might be a cholera outbreak at Kalomo Secondary School. The district council has recommended an immediate closure of the institution to save lives." (Lusaka Zambia National Broadcasting Corporation Network in English 0500 GMT 28 Jun 94)

NIGERIA

Increase in Drug-Resistant Malaria Causing Concern

94WE0305A Lagos THE SUNDAY GUARDIAN in English 24 Apr 94 p A3

[Article by Ambrose Akor: "Drug-Resistant Malaria Jumps By 100 Percent"]

[Text] News of the planned introduction of two new anti-malaria drugs into the country and the hope it raised recently in the battle against drug-resistant malaria were dampened by a report of about 100 percent increase in drug resistance in the South Eastern region.

The National Malaria Therapy Surveillance Network announced that data gathered from the region (zone A of the Primary Healthcare Scheme) showed an increase from 54 percent of reported malaria cases in 1990-91 being drug-resistant to a 90.6 percent in a 1992-94 study.

A similar trend was also noted to have been identified in parts of Delta and Edo States during the period. Both are the immediate neighbours of zone A on the western border. These drugs, LARIAM and FANSIMEF are being introduced into the country by Roche, almost four years after an expert committee set up by the World Health Organisation's African regional office recommended them as drugs of choice in the treatment of malaria.

Experts at a lecture on the status of malaria management in the country organised by the pharmaceutical firm, Roche, recently, received the report with cheers. That was as experts started considering a report that the widespread malaria-resistance to chloroquine in the country might have resulted from the importation and widespread sale of chloroquine of 100 milligramme base instead of the standard 150 mg.

Chief consultant malarialogist to the Federal Health Ministry, Dr. Okon Ekanem, told THE GUARDIAN ON SUNDAY that health officials were aware of the presence of the 100 mg chloroquine but would not say if that was responsible for the resistance to the drug.

He said the 150 mg base was British while the 100 mg was French, adding that the latter came into the country through donor agencies. Other experts stressed last week the need for standardization.

Although, Ekanem said last week that officials responsible for the management of malaria, especially in the most-affected areas, were being informed of the latest findings and taught what to do, he insisted that a massive public information campaign would raise apprehension in the region and destabilise the health programme.

THE GUARDIAN ON SUNDAY reported three months ago that the first results of an earlier study was being concealed for the same reasons. But that did not stop the devastating trend reported last week. Of 3,155 persons tested for malaria, 2,459 of them tested positive. Of that number, 1,721 of them showed they had *Plasmodium falciparum*, a species of the malaria virus that is resistant to chloroquine.

In three other studies in the region made up of Abia, Akwa Ibom, Anambra, Benue, Cross River, Enugu, Imo and Rivers states, of 57 tested for the drug-resistant malaria, 49 tested positive.

Twenty-nine others tested positive in a study of 32 persons and in the last case 23 of 24 persons tested positive.

A member of the southeastern zone of the malaria surveillance network said that death rate, as shown in a study in a local community, rose from 14 percent in 1982 to 40 percent of reported cases in 1988. The spokesman of the zone, Dr. E.N.U. Ezedinachi, said the rate dropped in recent studies, but quickly said that the recorded cases may have marginally dropped because strikes by hospital staff in recent times and increasing cost of medicare would have kept many patients away from hospitals where such data were gathered.

The North-Western region, made up of Sokoto, Kebbi, Kaduna, Niger, Kwara and the Federal Capital Territory, reported a maximum of 24 percent resistance as shown in parts of Kwara and Kaduna states. Most other parts of the region recorded between zero and 10 percent resistance rate.

On a wider scale were reports of reduced sensitivity to drugs which led to a longer curative period. Similar cases were recorded in the North-Eastern region. Resistance to chloroquine was also registered in the South-Western zone. But an early study on meflaquine, an alternative drug in Ibadan in 1988, increased the cure rate to 98 percent in most parts of the zone.

Officials acknowledged the "similarly devastating trend" in Delta and Edo states last week but said they were not surprised because of the similarity in environmental conditions between the two states and the states in zone A, where the drug-resistant malaria was known to be widespread.

Delta and Edo states health officials were known to be pressing for a separate surveillance zone last week in view of the "devastating trend" to give them special attention. Ekanem said last week that the surveillance centres, which he called centres of excellence in malarialogy, might be increased to 10 in view of the spreading trend.

He said if care was not taken by adopting preventive measures, fighting against sub-standard drugs, effective treatment and the establishment of a proper referral system, the drug-resistance cases might spread further.

SOUTH AFRICA

Adult Cases of AIDS Doubles in One Year

MB0606184194 Johannesburg Radio South Africa Network in English 1600 GMT 6 June 94

[Text] More than 1,100 new AIDS cases were reported in South Africa last year. This brings the total number of AIDS sufferers in the country to 3,071 since the start of the AIDS epidemic in 1983. Our Cape Town staff reports that the number of pediatric AIDS cases, which is probably the worst category in the country, saw a 50 percent decrease from the 211 cases reported in 1992. However, the number of adults who have contracted the disease doubled from 527 in 1992 to 1,062 last year. Almost 80 percent of AIDS sufferers contracted the virus sexually, while the transmission of the virus from mother to child accounted for 16 percent of the victims.

ZAMBIA

Meningitis Outbreak in Ndola, Kitwe Reported

94WE0304A Lusaka TIMES OF ZAMBIA in English 23 Apr 94 p 1

[Article by Lawrence Liandisha]

[Excerpt] Meningitis has broken out in Ndola and Kitwe and about 20 people have died from it in Ndola in the last three weeks.

Ndola hospital board principal administrator Mr John Nsakanya confirmed the outbreak but declined to give further details referring the matter to the hospital executive director Dr Patrick Nyendwa who was in Siavonga.

But sources said at least 20 people have died so far and the figure was likely to go up.

Kitwe Central Hospital executive director Dr Golden Bolla said a number of meningitis cases have been treated over a period and by yesterday there was one more admission.

Dr Bolla said he could not classify the Kitwe issue as an "outbreak." It was a periodical experience and the hospital had enough drugs to treat patients.

In Ndola, sources indicated the hospital did not have enough drugs and contigency supplies have been ordered from Lusaka to supplying the "limited" stocks.

Mr Nsakanya who did not know the drug position, insisted that he briefed Dr Nyendwa in Siavonga daily.

"Phone Dr Nyendwa on the following number (which he gave) because I have been briefing him on the position every day. I talked to him even last night."

Meningitis patients at Ndola Central Hospital are isolated in side wards to avoid the spread of the fatal disease which is also contagious.

Medical sources said it was difficult to curb meningitis because the symptoms were similar to those of malaria.

Some families gave patients anti-malaria drugs which led to death at home or soon after getting to hospital because of delay in receiving proper treatment.

Meningitis killed more than 30 people in Ndola and Kitwe last year. Most people died at home because of wrong treatment.

[Passage omitted]

ZIMBABWE

Total Eradication of Tsetse Now Possibility

94WE0306B Harare THE HERALD in English 6 May 94 p 9

[Text] Total eradication of tsetse, carriers of the cattle killer disease, trypanosomiasis, looms in Zimbabwe following intensified research into the behaviour of the fly. The use of baits, which is cheaper compared to the massive environmentally unfriendly ground and aerial spraying, had enabled Zimbabwe to clear the flies from some 20,000 square kilometres and reduced disease cases in the project areas from a high of 6,000 a year in 1986 to 20 this year.

A 450 km barrier of targets was erected along the border with Mozambique to stop reinvasion. Operations had now been extended to Doma, Hurungwe and Mashumbi in the Zambezi Valley, an area covering 10,000 square kilometres.

The fight against tsetse took a dramatic turn when the European Union agreed to fund a regional control programme in Malawi, Mozambique, Zambia and Zimbabwe.

Unless a regional programme was adopted, the individual country campaigns were bound to fail as tsetse did not respect national boundaries.

Millions of dollars had been disbursed to the four countries to strengthen their campaigns. Total financial assistance to Zimbabwe's tsetse branch by the EU [European Union] had now reached \$100 million.

Top EU officials, led by Mr Michael Laidler, head of the EU delegation in Zimbabwe, visited Rekomitjie Research Station in the Zambezi Valley on Wednesday to view research programmes and to hand over equipment and staff houses worth \$6 million.

They were accompanied by the Secretary for Lands, Agriculture and Water Development, Cde Boniface Ndimande, the Veterinary Services Director, Dr Stuart Hargreaves, and the tsetse branch assistant director, Cde Vitalis Chadenga.

The recent assistance made under phase two brought the total funds for equipment and housing to \$12 million.

Under phase one, which was started in 1986, two chalets for scientists, 10 houses for field assistants, a barrack block for casual workers, and showers were provided at the research station.

The electricity generating shed had been extended and equipped with new generators under phase two. Parts of the station had been rewired; and a new workshop and lecture room had been built. Work on overhauling the water supply is scheduled to start soon.

The survey systems and control techniques developed at the research station were widely used in Zimbabwe and many other countries in Africa, where they have been adopted in the Zimbabwean form or modified to suit local conditions.

Scientists at Rekomitjie, said that as a result of the EU aid, the cost effectiveness of baits for tsetse control was now about 1,000 times greater than it was in the 1960s, while the cost effectiveness of traps for surveys had been increased by a hundred-fold.

Research was now being concentrated on finding more odour attractants.

Thirty Cattle Deaths From Lumpy Skin in Midlands

94WE0306A Harare THE HERALD in English 16 Apr 94 p 3

[Excerpt] Lumpy skin and tick-borne diseases, which killed hundreds of cattle early this year, are still affecting livestock in the Midlands where 30 animals have died of the diseases, Agritex said yesterday in its crop and livestock report.

Lumpy skin, an acute viral disease, was sorting itself out following the end of the rains, and tick-borne diseaserelated deaths were likely to drop sharply as dipping of cattle has resumed.

Hundreds of cattle died from tick-borne disease due to an acute shortage of dipping chemicals. However, funds had since been secured to procure the chemicals.

Agritex said 30 cattle had died of tick-borne disease in Kwekwe. Lumpy skin disease was still to be brought under control in Mberengwa. Elsewhere the livestock condition was reported good. [passage omitted]

AIDS Screening in Guangdong in 1990 and 1991

54004802B Beijing ZHONGHUA LUIXINGBINGXUE ZAZHI [CHINESE JOURNAL OF EPIDEMIOLOGY] in Chinese Vol 14 No 5, Oct 93 pp 259-261

[English abstract of article by Zhong Zhenqiang [6988 2182 1730], Qu Guoyu [0575 0948 3842], Cheng Yizi [4453 0110 3320], Guangdong Regional Office, National Health and Quarantine Administration of PRC, Guangzhou]

[Text] A total of 260,112 persons of nine categories of key population were tested serologically for AIDS by the Quarantine Service in Guangdong Province and 16 cases were found HIV-positive (one of whom was confirmed), of whom six were foreigners and 10 were Chinese returned from overseas.

Guangdong Likely To Become China's Second Largest AIDS Epidemic area

54004803C Beijing CHINA DAILY (National) in English 3 Dec 93 p 3

[Excerpts] Officials here have launched a city-wide campaign to inform residents about the deadly AIDS virus.

[Passage omitted]

Hao Ruifeng, an official at the provincial epidemic prevention station, said that Guangdong is facing a serious spread of the deadly virus.

The Guangdong AIDS Surveillance Center has diagnosed 82 people in the province with AIDS, 79 of whom are Guangdong residents between the ages of 21 and 61.

Hao said the booming province will likely become China's second largest AIDS epidemic area, after neighbouring Yunnan Province.

AIDS in Guangdong has spread mainly through sexual contact, Hao said, adding that prostitution has made a comeback in recent years.

Last year, more than 50,000 cases of sexually transmitted disease (STDs) were reported at State-run hospitals in Guangdong. The province's substance abuse treatment clinic treated over 11,000 drug users.

To bring the situation under control, Guangdong has carried out campaigns to crack down on prostitution and the use of drugs.

It has also set up STD prevention centres and provincewide monitoring networks.

And an AIDS hot line is to get into operation soon, while Zhongshan Medical University and Jinan University have started sex education courses. Sex education booklets will be published soon as well.

"It has become a pressing matter to educate the young about preventing STDs and AIDS," said Wang Zijin, a medical researcher at Zhongshan Medical University.

A National Association of STD and AIDS Control and Prevention was set up on Tuesday in Beijing.

According to a senior official from the Ministry of Public Health, 1,159 AIDS and HIV cases have been reported in China. Fourteen people have died from the disease.

Treating AIDS With Herbal Medicine Said Successful

94P60289B Beijing JIAN KANG BAO in Chinese 23 Mar 94 p 2

[Article by Li Ming [7812 2494], committee member of AIDS Control Experts Committee; Reports on Using "Shengmingquan" to treat AIDS patients and AIDS-related symptoms]

[Summary] Recently an herbal medicine called "Shengmingquan (Life Spring)" was developed by Dr. Li Yongkang of the Yongkang Hospital specialing in traditional Chinese medicine. From September to December 1993, 10 AIDS patients and 10 patients with AIDS-related symptoms were treated with the medicine in the Luxi, Longchuan, and Ruili areas of Dehong County, Yunnan Province. In contrast, 10 other AIDS patients were treated with other medicine-No.1 Liujingao-and used as a control group. After a three-month period of treatment with the medicine, the patients' AIDS symptoms were greatly improved: the long-lasting fever disappeared, the diarrhea was controlled, respiratory tract symptoms were alleviated; skin rashes disappeared, the recurrent herpes zoster and herpes simplex were cured, and the oral Candidiasis albicans also disappeared. After treatment, most patients gained three to four kilograms on average. Although no noticeable change in the size of lymphnodes was reported, results of the patients' cell counts indicated that numbers of blood cells including erythrocytes, leukocytes, lymphocytes, and CD lymphocytes showed various degrees of increase. The researchers will be reporting periodically their findings of long-term treatment in terms of three months, six months and one year after the discontinuation of medicine. By contrast, symptoms of the control group who had been given only No.1 Liujingao were not improved at all. The AIDS-related liver diseases, including hepatitis that are normally found in patients with AIDSrelated symptoms, were greatly improved after "Shengmingguan" treatment. Compared to AZT or even DDC (Dideoxycytosine), promising results have been obtained with the useof this medicine. Instead of inhibiting bone marrow function and damaging patients' livers and kidneys, "Shengmingquan" activates the bone marrow and improves the functions of the liver and kidneys. The medicine is said to be very cost-effective, being fast relief, and is highly effective with little side effects.

Over 1,300 AIDS-Virus Infection Cases Reported

OW3105133094 Beijing XINHUA in English 1255 GMT 31 May 94

[Text] Beijing, May 31 (XINHUA)—A total of 1,361 AIDS-virus carriers have been discovered in 22 Chinese mainland provinces, municipalities and autonomous regions, and 22 of the country's 40 full-blown AIDS patients have died, an official from the Ministry of Public Health said here today.

Some 1,106 cases of the total involved mainland residents and the other 255 were foreigners and foreign citizens of Chinese origin, said the official at a seminar here today on China's AIDS prevention.

Despite the fact that China is one of the regions in the world with a relatively low rate of AIDS-virus infection, the Chinese Government has paid close attention to the issue, Chen Minzhang, minister of public health, told the seminar.

He said that China has intensified its efforts to prevent and curb AIDS, citing that in recent years the country has done a great deal in monitoring, educating on and researching into the disease.

Meanwhile, the Chinese Government has fruitfully cooperated in this area with the United Nations Development Program and the World Health Organization, Chen said.

China will keep to the principle of "prevention first" in its endeavors to curb AIDS and will actively advocate coordination and cooperation among relevant departments, the minister noted. It will also encourage the participation of the whole nation in the struggle against AIDS.

He said China will launch a publicity campaign on preventing and curbing AIDS so as to make people more knowledgeable about AIDS, which in turn is expected to help them avoid unhealthy behavior and boost their capacity of self-protection.

Official sources said that China is to draft medium and long-term plans on the prevention of AIDS as well as to step up the legislation of necessary laws so as to standardize the work and ensure the full implementation of measures designed to curb AIDS.

Public Health Ministry Holds AIDS Seminar

HK0106152994 Beijing RENMIN RIBAO in Chinese 1 Jun: 94 p 3

[Article by correspondent Ai Xiao (5337 4562): "Our Country Will Vigorously Pursue Health Education in the Face of the Invasion of AIDS"]

[Text] Beijing, 31 May (RENMIN RIBAO)—Faced with the invasion of AIDS, China will launch a vigorous health education campaign as a major preventive and control measure against the disease. At the three-day "seminar on the prevention and control of AIDS in China" jointly held by the State Council Research Office and Ministry of Public Health that begins today, studies by expert and academic research groups will be presented and examined in preparation for a formal submission of a "proposal on the prevention of AIDS in China."

Globally 400.000 AIDS cases—half of which occurred in the United States—were recorded between June 1985, when the world's first case was reported, and the early 1990's. Dramatic changes occurred in the mid-1990's when the spread of AIDS in developing countries exceeded that in the United States. A conservative estimate by the WHO projected that, by 2000, 50 million people around the world will have been exposed to the HIV virus, most of them in countries and regions such as Asia, Africa, and Latin America.

It has been learned that a total of 118 new AIDS cases were reported in 10 provinces and cities between January and May. A total of 1,361 AIDS cases have been recorded in 22 mainland provinces and cities (1,106 patients are mainland residents, and 255 are foreigners and overseas Chinese) and 40 of these carriers have developed full-blown AIDS (22 of them have died). The figures, however, came only from small-range tests of less than three million people.

State Councillor Peng Peiyun; Wu Jieping, National People's Congress Standing Committee vice chairman; Qian Zhengying, Chinese People's Political Consultative Conference vice chairman; Yuan Mu, State Council Research Office director; Minister of Public Health Chen Minzhang; among others attended today's seminar.

CHINA DAILY Article Warns About Spread of AIDS

HK1106073794 Beijing CHINA DAILY in English 11 Jun 94 p 4

[By Huang Zhiling: "AIDS Deserves Attention Today"]

[Text] Probably nine out of every 10 Chinese could not say precisely how the virus that causes acquired immune deficiency syndrome, or AIDS, is spread.

In the eyes of most Chinese people, AIDS is mainly a foreigners' disease.

But a report for the Chinese Government has warned that AIDS could be a serious problem.

The State Council Research Office report is based on research by the State Council and the ministry of Public Health which studied China's AIDS prevention and control programmes.

The world's first AIDS case was reported in the United States in 1981.

In the early 1990's, 400,000 patients around the world were diagnosed with AIDS. Nearly half of them were found in the United States.

Since the mid-1990's, however, the threat of AiDS has become of worldwide concern and it is now spreading especially fast in developing countries.

According to a conservative estimate by the World Health Organization, the world will have seen 50 million people infected by HIV by the year 2000. Most of these are expected to be in sia, Africa, and Latin America.

HIV is one of the viruses that causes AIDS.

China's first case of AIDS, in Beijing, was reported in June 1985. The patient was an American tourist.

Since then, 1,361 cases of HIV infection have been reported in 22 provinces, municipalities, and autonomous regions; 1,106 cases of HIV infection were found among mainland Chinese, the rest among foreigners and overseas Chinese.

Forty of the HIV carriers have developed AIDS, and 22 of them have died.

These figures were determined by a very small-scale testing operation among nearly three million people.

In China, the HIV virus has been spread mainly through the sharing of needles by intravenous drug users in Southwest China's Yunnan Province. More than 70 percent of China's AIDS cases reportedly come from Yunnan as a result of sharing needles.

However, in recent times, HIV infection from heterosexual contact is increasing faster than infection from sharing needles.

In 1991, 5.6 per cent of the HIV carriers were infected through sexual contact; in 1992, the figure was 13.8 per cent; and in 1993, 15.7 percent.

Outside Yunnan, most patients were found to have contracted HIV through sexual contact.

Before 1989, most HIV-carriers found in China were among foreigners. But since then, the number of Chinese infected with HIV has risen comparatively quickly.

The State Council report predicts that about 100,000 mainland Chinese will be HIV-positive by the year 2000. The report predicts about 20,000 cases will have developed into full-blown AIDS.

The World Health Organization predicts that by the end of this century the number of HIV infected people in China will be no less than the average for Asian countries as a whole.

If this happens, China will have a large number of HIV-infected people. The danger of this happening is quite feasible, according to the State Council report.

The 1992 World Health Conference predicted by 2002, southern Sahara in Africa would be the hardest-hit HIV-infected region in the world, as it was at the time of the report.

But towards the end of this decade, it will be Asia, home to 50 per cent of the world's population, that will witness a sharp rise in the spread of HIV. Each year, the number of Asians becoming infected with HIV is expected to be greater than the number of new infections in Africa.

A survey conducted by the Chinese Academy of Preventive Medicine shows that nearly half of the students investigated in eight Shenyang colleges, in Liaoning Province, did not fully understand how HIV was spread.

Public ignorance over how HIV is spread makes largescale infections possible, said the State Council report.

The increase in prostitution in China is expected to make sexual contact the most common factor in the spread of the infection, said the State Council report.

Police authorities are also concerned over the increase in drug use and, along with that, needle-sharing that can spread HIV

What is worse, say officials, is that drug users tend to be promiscuous. Women drug users often become involved in prostitution to finance their drug habit. This undoubtedly accelerates the spread of HIV, said the report.

China is yet to test all of its blood donor samples for traces of HIV.

Medical equipment, if not disinfected carefully, can be the agent for spreading HIV. In some of China's rural hospitals, medical equipment is not carefully disinfected, said the State Council report.

People aged between 18 and 45 are considered to be at the highest risk of contracting HIV. About 80 per cent of HIV-cases in China now are people aged between 20 and 49. Because this age group represents a normally productive part of society, the report says, the burden on the Chinese economy could be great.

Average annual medical expenses for AIDS patients range from 3,300 to 7,400 yuan (\$381 to \$855), which is half the average annual family income in China.

According to the report, some high-ranking officials show indifference to the potentially devastating threat of AIDS in China.

China now has only 1,000 or so HIV-infected people, they argue. Even if this number were to increase 20-fold, it would still represent just a tiny fraction of the nation's populace, they say.

Many ordinary people still think AIDS is just a foreigners' disease and, providing one doesn't become involved in prostitution, doesn't represent a real danger. Also, some prostitutes think they can avoid infection by avoiding foreign clients, said the report.

Public awareness about the threat is at a low level in China.

Each year, wide publicity is given to the AIDS issue around December 1, which is World AIDS Day. But for the rest of the year, the problem is often ignored.

To increase public awareness on the AIDS problem, the Chinese media need to provide free time and space for public education, said the report.

Health Protection Plan To Fight Spread of AIDS

HK1906050394 Beijing ZHONGGUO XINWEN SHE in English 0416 GMT 18 Jun 94

[Text] Beijing, June 18 (CNS)—Facing the threat of AIDS, China has decided to launch a health protection education and publicity campaign to prevent and control spreading of AIDS. On a seminar on countermeasures against AIDS recently co-hosted by the Policy Research Office of the State Council and the Ministry of Public Health, relevant officials discussed and listened to research results made by experts and scholars in order to put forward suggestions and countermeasures against AIDS.

It was reported that during the period from January to May this year, 118 HIV cases had been newly discovered in 10 provinces and cities. Up to date, based on monitoring conducted within a small scope of 300 million people, 1361 HIV cases had been reported to be discovered in 22 provinces, cities and the autonomous regions of the Mainland including 1106 cases involving the Mainland residents, 255 cases involving foreigners and overseas Chinese. Among them, there had been 40 AIDS victims and 22 of them had been dead.

Official: Beijing Taking 'Active Part' in Anti-AIDS Fight

OW0407133894 Beijing XINHUA in English 1251 GMT 4 Jul 94

[Text] Guiyang, July 4 (XINHUA)—China is taking an active part in preventing aids by cooperating with the international community, a government official said in Guiyang, capital of southwest China's Guizhou Province.

The official with the Ministry of Public Health made the remark during a recent international drug abuse and AIDS symposium jointly sponsored by the World Health Organization and the Australian and Chinese governments.

The symposium, part of an international program to fight AIDS, is aimed at promoting training classes for Chinese public health officials and experts on drug and aids prevention and treatment, the official said.

AIDS is known as a global disaster with no effective means of treatment. All over the world, there have been more than three million aids victims and some 15 million HIV carriers. In China more than 1,000 cases of HIV carriers have been detected. However, a recent investigation showed that only half the people surveyed had acquired basic knowledge about the hazards of aids and the way it is spread.

By working together with international organizations such as the World Health Organization and United Nations Development Program and the European Economic Community, China expects to make better use of international funds, technology and successful experience in dealing with drug abuse and venereal diseases, the official said.

China Makes Efforts for AIDS Prevention, Control

OW0407041094 Beijing XINHUA in English 0330 GMT 4 Jul 94

[Text] Beijing, July 4 (XINHUA)—The number of HIV-positive and AIDS cases has been on the rise in China over recent years, and the government is determined to stem the deadly tide.

An official from the Ministry of Public Health said that more than 1,360 HIV-positive cases have been reported in China, of which 255 were foreigners or foreigners of Chinese ancestry.

Of the 40 full-blown AIDS cases reported in China, 22 of the victims have died, he noted.

China is still one of the countries with a very low infection rate of AIDS. However, the official said, the government has set up a network involving AIDS surveillance, quarantine, publicity, education, treatment, management and research all over the country.

In addition, committees of experts are directly involved in the guidance of AIDS prevention and control work.

According to the official, the Chinese Government is actively pursuing co-operation with international organizations such as the United Nations Development Program (UNDP) and the World Health Organization (WHO) on AIDS control.

With assistance from the UNDP, the State Council Research Office and Ministry of Public Health jointly set up a research group for AIDS prevention and control last year, consisting of experts from different fields.

The research group has published a report on the control of AIDS in China, which analyses AIDS/HIV infection in the country and the social and economic implications of AIDS. The report also notes that the problems and difficulties encountered in the prevention and control of AIDS in China and suggests appropriate measures.

According to the report, transmission of the AIDS virus, especially from countries which border China, would have a great impact on China. With the daily increase of

China's contacts with foreign countries, it is becoming difficult to stop the spread of the virus from abroad.

Meanwhile, the large floating population in China creates conditions for the spread of AIDS. The general public knows little about AIDS or its prevention, says the report.

It calls for efforts to promote knowledge of AIDS prevention and control among the whole of China's vast population by the year 2000

"Only thus can the incidence of HIV infection in China continue to be kept at a relatively low level, and its disturbances and challenges to the policy of openness and modernization construction drive in the country avoided," says the report.

The objectives, according to the report, are to establish as soon as possible a prevention and control system involving the whole community by giving full authority to all departments concerned and to form, during the Eighth Five-Year Plan (1991-1995), a preliminary national macroscopic control mechanism. This will involve education, health insurance and surveillance so as to obstruct the channels of AIDS transmission.

Chen Minzhang, minister of public health, said China will put more money into AIDS prevention and control. Meanwhile, it will formulate national mid-term and long-term programs and set up more laws and regulations concerning AIDS control, he said.

The minister also urged China's public health departments to keep expanding co-operation with their foreign counterparts and make contributions to the global prevention and control of AIDS.

Paper Analyzes HIV Occurrences

54004802A Shanghai ZHONGHUA CHUANRANBING ZAZHI [CHINESE JOURNAL OF INFECTIOUS DISEASES] in Chinese Vol 11 No 3, Aug 93 pp 150-154

[English abstract of article by Kang Laiyi [1660 0171 0308], Sun Xhihua [1327 2450 5478], et al., Shanghai Hygiene and Anti-Epidemic Center, Shanghai]

[Text] AIDS is a serious problem which potentially threatens the people of China. The first case of AIDS was identified in China in an American businessman in June, 1985. As of 31 December 1992 there have been 969 infections (including 12 patients with AIDS), being distributed into 18 provinces. Now there are four occurrence types of HIV/AIDS in China. The mode of transmission is mainly due to drug injection; however, sexual transmission is increasing, especially through heterosexual transmission. The paper also showed that although HIV prevalence in the country is still low, the absolute number of HIV infection and STDs are going up obviously and the risk factors related to HIV infection are increasing rapidly, especially among young adults being changeable quickly. With regard to the

strategy of prevention and control of HIV/AIDS in China, the paper presented several key points.

IV Drug Users Show High Rates of HCV, HBV, HIV Infection

54004802F Beijing ZHONGHUA LIUXINGBINGXUE ZAZHI [CHINESE JOURNAL OF EPIDEMIOLOGY] in Chinese Vol 14 No 5, Oct 93 pp 275-278

[English abstract of article by Cheng Hehe [4453 0149 0149], Jia Manhing [6328 2581 4767], et al., Yunnan Provincial Hygiene and Epidemic Prevention Station, Kunming]

[Text] To assess the prevalence of HBV and HCV infections among intravenous drug users (IV DU's) in Ruili County, Yunnan where there was a high HIV infection rate in IV DU's, the serological examination indicated that there was also a high anti-HCV antibody positive rate in this group. Among those with anti-HIV antibody, 73 (92%) were anti-HCV antibody positive. There was a close relationship between HIV infection and HCV infection. It may suggest that both are related to IV drug using.

Although there is a high HBV infection background in Yunnan Province, the prevalence of HBV infection in IV DU's (68%) and that in the controls (52%) still show a significant difference.

Genital Herpes Rates in Different Professional Groups in Oingdao

54004802C Beijing ZHONGHUA LIUXINGBINGXUE ZAZHI [CHINESE JOURNAL OF EPIDEMIOLOGY] in Chinese Vol 14 No 5, Oct 93 pp 262-265

[English abstract of article by Quan Limin [2938 0500 2404], Wang Youmiao [3769 2589 5379], et al., Hygiene and Epidemic Prevention Station of Shibei District, Qingdao]

[Text] Genital herpes is one of eight legally reportable sexually transmitted diseases (STD's) in China. Using a HSV (Herpes simplex virus) antigen ELISA kit HSV antigen in 1,148 clinical specimens collected from the genital organs (penis, cervix, vagina and vulva) of 446 men and 702 women in Qindao was detected and typed and divided into 11 different professional and two special groups (patients with cervical cancer and pregnant women). The highest positive rate of HSV antigen was found among long-distance transport drivers (48.0%). The second and third high positive rates were among waiters and waitresses in private restaurants (39.2%) and patients with cervical cancer (38.2%). The positive rates among self-employed retailers and employees in private inns and restaurants were notably higher than those among employees in state-run shops, restaurants and hotels. And, the positive rate among workers was higher than that among peasants. There was

no notable difference between the positive rate of HSV antigen among men (24.2%) and that among women (21.5%). But the incidence of HSV-2 was much higher than that of HSV-1 infection. The results indicate that some special professional groups have high rates of genital HSV infection. More attention needs to be paid to these special groups in order to control sexually transmitted herpes diseases.

Hepatitis B Studied in Seven Nationalities

54004802D Beijing ZHONGHUA LIUXINGBINGXUE ZAZHI [CHINESE JOURNAL OF EPIDEMIOLOGY] in Chinese Vol 14 No 5, Oct 93 pp 266-270

[English abstract of article by Luo Kangxian [7482 2123 0341], He Chao [0149 6389], et al., Nanfang Hospital, The 1st Military Medical University, Guangzhou]

[Text] Seroepidemiological investigations on the hepatitis B virus infection were carried out among populations of seven nationalities that could represent the main categories by the language system. The HBsAg prevalence, after sex-and age-adjustment, was 15.3% in Han; in contrast, that was 16.2% in Tibetan and 24.0% in Yao, being significantly higher (P/h 0.001); and on the other hand, 7.0% in Li and 5.3% in Uygur, being significantly lower than that in Han (P< 0.001). The age peaks of HBsAg prevalence in Uygur and Li declined much earlier than others. HBeAg was not detected in women during childbearing age. The ratios of anti-HBsAg were between 1.61 and 2.06 in general while they were only 0.82 in Tibetan and 1.09 in Yao.

Study of Hepatitis C Infection Among Blood Donors

54004802E Beijing ZHONGHUA LIUXINGBINGXUE ZAZHI [CHINESE JOURNAL OF EPIDEMIOLOGY] in Chinese Vol 14 No 5, Oct 93 pp 271-274

[English abstract of article by Tang Shixing [0781 2514 1630], Ma Xiankai [7456 6343 0418], et al., Institute of Microbiology and Epidemiology, Academy of Military Medical Sciences, Beijing]

[Text] A total of 2,273 blood donors from various regions in China were tested for serum anti-HCV anti-bodies in a seroepidemiological study. The prevalence of anti-HCV in volunteer blood donors was 0 - 1.10%, which was lower than that in professional blood donors from Liaoning and Anhui Provinces (1.49% and 3.14%, respectively), whereas the positivity rate of anti-HCV was as high as 30.13% in the professional blood donors from Hebei Province and 31.86% in those from Inner Mongolia Autonomous Region. The prevalence of anti-HCV was significantly higher in the blood donors with history of hepatitis and abnormal ALT levels than those without hepatitis and with normal ALT. Plasma donation was the main cause of HCV infection. However, the prevalence of anti-HCV showed no significant sex and

age differences even though the anti-HCV activity profile showed geographic difference.

Hepatitis C in 88 Cases of Childhood Non-A Non-B Hepatitis

54004802B Shanghai ZHONGHUA CHUANRANBING ZAZHI [CHINESE JOURNAL OF INFECTIOUS DISEASES] in Chinese Vol 11 No 3, Aug 93 pp 155-157

[English abstract of article by Duan Shucheng [3008 1859 6134], Gu Xinhuan [7357 2450 3562], et al., Pediatric Hospital, Shanghai Medical University, Shanghai]

[Text] Hepatitis C was investigated in 88 cases of childhood Non-A Non-B hepatitis out of 1,353 cases of viral hepatitis admitted to this hospital in the past five years. The antibodies to hepatitis C virus (anti-HCV) in these patients were measured by HCV EIA recombinant 2nd generation kit (Abbott company). The positive rates of anti-HCV were 3% in Non-A Non-B hepatitis (NANBH), 0% in fulminant hepatitis failure (FHF), 5.6% in chronic hepatitis (CH) and 5.9% in post-transfusion hepatitis (PTH). The study confirmed that HCV exists as coinfection or superinfection with hepatitis B virus (HBV). Our data indicate that HBV infection is still the major cause of FHF, CH and PTH in children. Whereas there is childhood non post-transfusion hepatitis C, it is suggested that childhood hepatitis C from inapparent transmission deserves attention.

China Still Faces Threat of Bubonic Plague

94P60289a Beijing JIAN KANBAO in Chinese 15 Mar 94 p 4

[Article by Fan Zhenya [288 2182 0068], Associate Research Fellow of the Institute of Epidemiology, Academy of Preventive Medicine]

[Summary] Although incidences of the black death went down from 1956 to 1993 with an average annual report of only 10 cases, China is still threatened by the disease. The reasons are:

- 1) Outbreaks in Mongolian in 1993 may trigger an outbreak in China and spread to other parts of China's territory;
- 2) In some parts of China the origin of the disease is still unclear:
- 3) Although there has never been an outbreak in China, human black death is still very active in epidemic areas; and
- 4) Insufficient funding has hindered the government's efforts to control the disease and resulted in an increase of vectorial insects and animals, including rats.

Increase in Drug-Resistant Gonococcus

94P60289C Beijing JIAN KANG BAO in Chinese 19 Apr 94 p1

[Article by Zhou Shi [0719 4258]]

[Summary] At the Eighth Dermatology Symposium held by the Chinese Society of Medicine, Ye Shunzhang, Director of the State Venereal Disease (VD) Prevention and Control Research Center, pointed out that drugresistant gonococcus strains are increasing in China every year. In 1987, the center launched a VD surveillance campaign and collected 1,529 strains of gonococci. Among them, 879 strains (57.5 percent) were resistant to penicillin. In Nanjing and Nanning, strains resistant to spectinomycin increased from two in 1991 to 14 in 1992 among 300 strains tested, and 52 percent of the 300 strains were found to be on the borderline of spectinomycin-resistant level.

Malaria on the Increase in Henan

94P60289e Beijing JIAN KANG BAO in Chinese 8 May 94 p 1

[Article by Zhang Yi [1728 1150]] (txt)[Summary] A report of the National Symposium on the Analysis of the Malaria Situation has revealed that in 1993 alone, 1,010 cases of malaria were reported in Henan Province. The morbidity had doubled since 1992, and at the beginning of 1994, 60 new cases had been reported in Kaifeng City alone. The main reason for the increase is believed to be an increase of cross-infection during blood transfusions. Reportedly, 60 percent of 1,000 cases of malarial patients are blood donors or those with a history of blood transfusion.

Parasites Infect Most of Nation's Population

54004803A Beijing CHINA DAILY (National) in English 27 Nov 93 p 3

[Article by Zhu Baoxia]

[Text] Parasitic diseases have infected more than 62 per cent of Chinese residents and have become a major threat to public health, especially in rural and ethnic areas.

Some medical specialists suggest that central and local governments include parasitic disease control in their social and economic development programmes and increase budgets for parasite eradication.

Ministry of Public Health experts, who recently completed a nation-wide survey exposing the problem, hoped that extensive publicity and education could raise the public's awareness regarding parasitic illnesses.

The survey found that of the 62 per cent of Chinese infected with intestinal parasites, some 43 per cent had two or more species of parasites. Some people had as many as nine species.

The rate of infection is even higher among farmers and ethnic people because of their agricultural activities and dietary customs.

Most are infected with roundworm, pinworm and whipworm.

It is estimated that some 531 million people in the country have roundworms.

Each year, the central and local governments spend some 150 million yuan (about \$26 million) treating people infected with such soil-transmitted parasites as roundworm, pinworm, whipworm and hookworm.

The national survey, the first and the largest of its kind in Chinese history, lasted for eight years from 1988 to 1992.

The Ministry of Public Health and local governments spent more than 5.2 million yuan (over \$900,000) for the survey which involved about 8,000 technicians and medical specialists.

The survey selected 2,848 pilot sites in 726 counties, and some 1.5 million persons were surveyed by fecal examination.

A total of 56 species of parasites were detected on the mainland. Of those, three species of trematodes detected in Anhui and Fujian provinces are the first recorded in humans on the mainland. Another species, also found in Fujian Province, is the first instance of infection in a human.

The highest infection rate—nearly 95 per cent—was reported in South China's Hainan Province. The lowest—17.5 per cent—was in northeastern Heilongjiang Province.

Parasitosis Situation Remains Serious

94P60289D Beijing JIAN KANG BAO in Chinese 20 Apr 94 p 1

[Article by Zheng Lingqiao [6774 7227 1564]]

[Summary] Feng Zheng, Associate Director of the Academy of Preventive Medicine, has called for more research, prevention, and control of parasitosis. He said that in China, parasitosis is not yet totally under control. Malaria, especially, can break out at any time, and so far schistosomiasis remains out of control in 122 counties (and cities). Because of the continuous expansion of falciparum-infected areas and the increase in drugresistant Plasmodium falciparum strain, many outbreaks have been reported in malarial epidemic areas, and in Yunnan and Hainan provinces, the epidemic situation is even worse. In northern Sichuan Province, disease incidences of Kala-azar is increasing, and the desert areas of Xinjiang and Inner Mongolia, incidences of Kala-azar are also increasing. Still, more than one million people suffer from filariasis in China, and hydatidosis is damaging the regions with a population of more than five million. In some parts of China, hookworm infection is

still common. In urban and rural areas, people are generally infected with 56 kinds of parasites; 62.6 percent of the population is infected with one parasite and 28.6 percent with two or more parasites. Feng Zheng warned that if parasitosis prevention work is not strengthened, China's population quality and economic construction will be seriously affected.

First Dental Care Foundation Set Up

OW0407125394 Beijing XINHUA in English 0720 GMT 4 Jul 94

[Text] Beijing, July 4 (XINHUA)—The China Dental Diseases Prevention Foundation, the first of its kind in China, was set up here Sunday [3 July] by the National Committee for Oral Health under the Ministry of Public Health and Shenzhen Guangshun Ltd.

Wan Li, former chairman of the National People's Congress (NPC) Standing Committee, and Chen Minzhang, minister of public health, are the foundation's honorary directors.

The foundation is aimed at realizing the state's goal of "oral health for all by the year 2000", according to Minister Chen.

The foundation will organize activities to publicize and educate people about dental care, fund studies and research on new techniques to prevent and treat oral diseases, and reward units and individuals who make great contributions to the national program.

Chen said that surveys show that 60 percent to 80 percent of Chinese suffer from various oral ailments, especially decayed teeth. On the average, each person has two decayed teeth.

He noted that statistics show that last year there were only about 23,000 dental physicians in China—one for every 50,000 people, as against one for every 2,000 people in developed countries.

The foundation, which relies on donations for its funds, has so far received 1.3 million yuan (about 150,000 U.S. dollars) from four private companies.

REGIONAL AFFAIRS

WHO Officials Comment on Health Problems in Asia

BK2806085294 Bangkok BANGKOK POST in English 28 Jun 94 pp 1, 3

[Report by Aphalak Aphatiasewi]

[Text] ASIA will probably witness the larges explosion in HIV cases by the year 2000 with the number of infections expected to increase five-fold to over 10 million, according to a United Nations expert.

The director of the World Health Organisation's Research and Intervention Development, Global Programme on AIDS, Dr Peter Piot, said HIV was spreading as fast in Asia as it did a decade ago in sub-Saharan Africa.

"If it continues at this rate, there will be more new infections in Asia than in Africa," he said.

The picture of Asia today and for the future looks sombre, he said, and the likely impact of AIDS will be tremendous unless appropriate action is taken immediately.

Dr Piot suggested at a ministerial meeting on "Regional Cooperation in Health Development" that both short and long-term strategies be used against the epidemic.

These include condom promotion and harm reduction among intravenous drug users and sex education among youth. [Sentence as published]

Dr Piot said education was the cornerstone of AIDS prevention.

"It should not only provide information on how to avoid acquiring or transmitting HIV infection; it should educate communities about the fact infected people are not a danger to others through every day social contact, about caring for them, and about not discriminating against people with HIV and their families," he said

Although there is no magic formula for AIDS and STD (sexually transmitted disease) control, Dr Piot said the spread of HIV could be prevented and individuals, families and communities could learn to cope with AIDS.

He praised Thailand for its initiative in fighting the AIDS epidemic.

"Thailand is one country leading the world in stopping the epidemic," he said.

The meeting also discussed malaria drugs, iodine deficiency and the eradication of polio.

Mr Wichai Posayachinda of WHO's Collaboration Centre for Research and Training in Drug Dependence said appropriate measures should be taken to handle health problems. He said the widespread abuse of stimulants, the clandestine production of methylamphetamine and increases in alcohol consumption were new concerns for Thailand.

Dr Wichai, the director of Chulalongkon University's Drug Dependence Research Centre, said alcohol constituted the most popular contributor to substance abuse.

Opium abuse is common among the rural populations of Laos, Burma and Thailand, but not Vietnam although the injection of opium solution is evident in Hanoi and Ho Chi Minh City.

Dr Wichai said heroin abuse was confined mainly to the urban areas of Burma and Thailand.

The abuse of cannabis and medicinal drugs—particularly tranquilizers, the inhalation of industrial products, paint, thinner and glue, and polydrug use were also evident, he said.

"The situation calls for effective national intervention and regional collaboration in an attempt to curb the problem," he said.

WHO malaria adviser for the Western Pacific region, John Storey, said some malaria control programmes had been successful, but others still in the early stages of development and implementation had recently faced obstacles.

"Programmes are increasingly being confronted with problems associated with multi-drug resistance by the predominant parasite species, changes in vector behaviour, and increased population mobility within countries and across international borders," he said.

Mr Storey said innovative tools to strengthen malaria control were being developed and tested for more efficient programme development.

WHO's Global Programme for Vaccines medical officer on polio, J.K. Andrus, said the primary strategies necessary to achieve polio eradication involved obtaining high political commitment, polio vaccine efficiency and maintaining effective surveillance.

He said efforts to control the disease must be coordinated between neighbouring countries.

Dr Lay Maung, the UNICEF Regional Adviser on Health and Nutrition, said inter-country and interagency collaboration was essential to achieve the middecade goal of creating a universal standard of iodinisation (USI).

"One country may achieve USI but if non-iodised salt is sold across borders, then any gains will be lost," he said.

Dr Maung said legislation concerning the production, distribution and import of iodised salt should be adopted simultaneously by all countries, and information should be shared among them.

He said the crucial role of the private sector, nongovernmental organisations and industry in achieving USI and eliminating iodine deficiency disorders should be recognised and their active participation and collaboration sought by the government.

"Countries should exchange information on the design and cost of iodisation plants so they can produce high quality iodised salt at lower cost," he said.

Pact Signed on Tackling Regional Health Problems

BK2906080194 Bangkok BANGKOK POST in English 29 Jun 94 p 3

[Text] The health ministers of Cambodia Laos, Vietnam, and Thailand yesterday signed a joint statement to better tackle regional health problems.

The statement, issued on the last day of a two-day ministerial meeting in Phatthaya on Regional Cooperation in Health Development, ignores political boundaries.

It would be enforced after official acknowledgment from the four countries' cabinets.

The statement was signed by Public Health Minister Athit Urairat, Cambodian Health Minister Chhea Thang, Lao Vice-Health Minister Bounkhouang Phichit and Vietnamese Health Minister Nguyen Trong Nhan.

The ministers said they were committed to eradicating and resolving priority health problems of common concern.

Each country was determined to fight against subregional priority health problems through balanced, comprehensive and multidisciplinary approaches, they said.

They promised to undertake collective action to tackle problems including HIV/AIDS, malaria, iodine deficiency disorders, substance abuse, poliomyelitis and other epidemic diseases.

Planning and management coordinating bodies would be formed at local and national levels.

New departments would aim to introduce action programs and would adopt policies, programs and strategies to achieve a more coordinated control of health problems.

Ministers also called on the international community to offer concrete technical and financial assistance to new collaborative programmes.

The meeting focused on five major common communicable diseases in neighbouring countries—HIV/AIDS, malaria, polio, substance abuse and iodine deficiency.

Dr. Athit, in his closing remarks, said it was time to change the "days of discussion" into action.

"We found that we are ready to invest for our future—the children and women," he said.

"And we also wanted to be better prepared for any emerging health threat. AIDS and substance abuse is a case to test our readiness."

INDONESIA

Twenty-One People Infected With HIV

BK2206094594 Jakarta THE INDONESIA TIMES in English 10 Jun 94 p 8

[Text] Pakanbaru—Twenty-one people have been infected with human-immuno deficiency virus (HIV) in Riau Province, adding the number of people infected with the killer virus to 234 people.

"Most of the HIV carriers—five in Batam, six in other Riau islands, and two in Pakanbaru Provincial capital of Riau," head of the Regional Health Office, Dr. Salohot, said here on Wednesday. [sentence as published]

"So far no people have been infected with the acquiredimmune deficiency syndrome (AIDS) virus in Riau. There are only people infected with HIV, a virus which leads carriers to suffer from AIDS," she said commenting on reports saying that some people have contracted AIDS virus in the province.

The director general for medical service of the Health Ministry, Dr. Suyoga MPH [Master of Public of Health], recently said that the number of people infected with AIDS and its virus has reached 263.

"Some 213 of them are infected HIV, while the remaining 50 already suffered from AIDS," he said when installing new officials in the Yogyakarta-based Dr. Sarjito Hospital last month.

Forty-Eight AIDS-Infected Thai Fishermen Sent Home

BK2306084494 Jakarta ANTARA in English 1215 GMT 22 Jun 94

[Text] Jayapura, June 22 (ANEX/ANTARA)—Fourty-eight Thai fishermen infected with human immuno-deficiency virus (HIV) have been sent home by the local government here in cooperation with their employers.

Head of the Epidemic Prevention Department of the local Health Office Dr. Sanjaya said here on Wednesday that the Thai fishermen worked in Merauke Regency.

"Their names are registered in the immigration office and are banned from entering the country," he said.

He added that there are six people infected with HIV in the region, adding that they live in Irian Jaya's regencies of Jayapura, Merauke, Jayawijaya, and Sorong.

28 Jun 94

cials said Tuesday [28 June].

In Indonesia there are 234 people infected with the virus causing AIDS.

JAPAN

Hospitals in Host Prefecture To Offer AIDS Care OW2806123394 Tokyo KYODO in English 1134 GMT

[Text] Yokohama, June 28 KYODO—All 10 hospitals run by the Kanagawa Prefectural Government will now accept people with AIDS or those with the AIDS-causing human immunodeficiency virus (HIV), prefectural offi-

The 10th International Conference on AIDS will be held in the prefectural capital of Yokohama on Aug. 7-12.

AIDS sufferers and people who are HIV positive are able to find treatment in the prefecture, but the latest move is aimed at making treatment more accessible as well as encouraging other centers to accept AIDS and HIV-positive patients, the officials said.

Last year, the prefectural government issued a manual outlining how the prefectural hospitals could treat AIDS sufferers.

MALAYSIA

Rehabilitation Center Planned for HIV-Infected Prostitutes

BK2906122894 Kuala Lumpur NEW STRAITS TIMES in English 28 Jun 94 p 9

[Excerpt] Kuala Lumpur, Mon. [27 June]—The Health Ministry will spend RM [ringgit] 5 million annually to manage the nation's first rehabilitation centre for prostitutes having the human-immunodeficiency virus (HIV), Minister Datuk Lee Kim Sai said today.

The centre will begin operation by the end of the year and will be housed in an old district hospital.

About 100 prostitutes with the virus have been identified by the Ministry.

"But I believe that there are many more unreported cases of prostitutes who have the virus."

The location of the centre has already been decided. However, it will only be disclosed when the centre is officially opened, he said after appearing on TV3's morning talk show "Malaysia Hari Ini" [Malaysia Today].

To determine if an inmate has been rehabilitated, the Ministry is working on a method of evaluation. It is studying the various methods used by other countries such as Japan and Cuba.

"Besides giving them free medical treatment, they will also be counselled, taught vocational skills and given advice on not spreading the virus further." [passage omitted]

PHILIPPINES

Health Official Reports Seven AIDS Cases in Davao City

BK1805151594 Quezon City PTV-4 Television Network in Tagalog 0500 GMT 18 May 94

[Text] There have been seven AIDS cases reported in Davao City. Health Secretary Juan Flavier said three have become full- blown cases and one person has been confirmed dead due to the disease. During the opening of the Filipino Style Health Center at Davao Medical Center, Flavier said that of 494 recorded HIV carriers 135 have become full-blown AIDS cases. He added that of 1,300 commercial sex workers tested for HIV, nine were found to be carrying the virus.

Angeles City Official Reports 18 Cases of HIV

3K3105040294 Manila PHILIPPINE DAILY INQUIRER in English 26 May 94 pp 1, 6

[By Jay Sangil]

[Text] Angeles City—Eighteen bar girls here have been found to have the AIDS-causing human immunodeficiency virus, a city official said yesterday.

Four of the girls have reportedly died of the virus at the San Lazaro Hospital in Manila.

Councilor Romeo Taruc, who heads this city's Board of AIDS Prevention and Control, said a medical examination was recently conducted on 2,314 young women by the Department of Health (DOH) and the United States Naval Medical Unit II.

The girls found to be HIV positive were employed as hostesses at the nightclub row on Fields Avenue in Balibago, he said.

Taruc expressed the suspicion the girls were among those driven from the night spots of Ermita during the campaign waged by Manila Mayor Alfredo Lim.

He said around 3,000 women have been registered as "hospitality girls" working on Fields Avenue and Mac-Arthur Highway, but that hundreds more are employed in karaoke pubs and other entertainment spots.

He said a number of the unregistered women may be infected with the virus and urged owners of bars and similar establishments here to cooperate with the city's anti-AIDS campaign.

Figures released by the DOH as of last March placed the number of deaths from AIDS in the Philippines at 82. Those recorded to have AIDS or are HIV-positive numbered 494.

There is no known cure for AIDS. For a time, the drug AZT was thought to slow down the virus' damage on a patient's immunity system, but it has since been found to produce no such effect.

DOH physicians were reported to have been testing the drug's effects on a number of AIDS patients at the San Lazaro Hospital.

Death Toll in Bicol Cholera Epidemic Reaches 46

BK0206095694 Manila PHILIPPINE DAILY INQUIRER in English 28 May 94 pp 1, 11

[Text] The death toll in the cholera epidemic in Bicol has risen to 46, with the number of people suspected afflicted climbing to 916, Health Secretary Juan M. Flavier said yesterday.

Nearly half, or 42.8 percent, of those reported afflicted are 15 years old or younger, but it was not known how many of those who had succumbed were children.

The figures from reports sent last week and yes, crday by the Department of Health's regional office in Legazpi City indicated a fatality increase of 91.67 percent in a week's time, as well as a rise of 186.25 percent in the number of cases.

But Flavier said the situation has become "manageable and under control" as of yesterday. He also said the increase in casualties and reported number of cases must have been due to the fact that "data gathering is now complete."

He said the epidemic, which broke out late last month, had peaked 10 days ago.

In his report. Dr. Mario B. Brizuela of the regional epidemiology and surveillance unit in Legazpi City said eight municipalities from Camarines Sur, eight from Albay, and four from Sorsogon are affected by the cholera outbreak. Albay has the most number of cases, 529, and deaths, 28.

Of the 916 "cholera suspects," 65 are confirmed cases based on the culture and analysis of stool samples, Brizuela said.

He said the number of suspected cases increased after residents of the affected communities visited the wakes of those who had died of the disease. He noted that most of the cases developed symptoms within a few hours.

Flavier said the food served and the utensils used during the wakes may have helped spread the disease.

Brizuela said the "rapid increase" of cholera cases can be attributed largely to "poor environmental sanitation."

"The absence of sanitary human waste disposal and potable water source in the affected areas are the major reasons for this epidemic," he said.

He noted in his report that death from cholera may be prevented if patients are immediately brought to the nearest hospital or hydration center.

Flavier said disaster teams equipped with sufficient medicines, intravenous fluids, and oral rehydration salts have already been dispatched to the affected areas.

Ir. Albay, these are Rapu-rapu, Bacacay, Ligao, Pio Duran, Libon, Polangui, Oas, and Guinobatan; in Sorsogon, Pilar, Donsol, Bacon, and Matnog; in Camarines Norte, Capalonga; and in Camarines Sur, Nabua, Pasacao, Baao, Pili, Bula, Canaman, Pamplona, and Milaor.

Death Toll in Bicol Cholera Epidemic Reaches 58

BK2106090094 Quezon City PTV-4 Television Network in Tagalog 0500 GMT 21 Jun 94

[Text] Eight more people have died from cholera in the Bicol area. This was reported by the Health Department as health officials work to eliminate the epidemic completely. Fifty-eight people have died from cholera since it broke out in Bicol last month. Meanwhile, the Health Department has sent health officials to General Santos City to investigate reports that diarrhea has also broken out in the city.

Cholera Outbreak Affects 200 People in Cebu Epidemic

BK2206104194 Manila PHILIPPINE DAILY INQUIRER in English 21 Jun 94 pp 1, 11

[Text] Cebu City—At least 200 persons have been afflicted with cholera in an epidemic that now stalks 12 towns and three cities in Cebu, the Central Visayas Regional Health Office reported yesterday.

In Manila, the Department of Health [DOH] documented yet another cholera outbreak in General Santos City in Mindanao, where 263 persons are suspected of having been stricken by the disease.

In the earlier reported outbreak in Davao City, three persons were said to have died and at least 80 were hospitalized, according to the latest reports of the DOH's Field Epidemiology Training Program (FETP).

Dr. Jose Rodriguez, assistant director of the RHO [Regional Health Office] here, expressed the suspicion half of the number of those downed by cholera were children.

Reports of death from the disease could not be confirmed as the health team sent to the affected towns arrived after the supposed victims had been buried, Rodriguez said.

So far, five have been reported dead due to cholera three in Balamban and two in Asturias, both on the west coast of Cebu.

Rodriguez said cholera cases have also been reported in the southern towns of Carcar, Sibonga, San Fernando,

Tuburan, Tabuelan, Badian, and Moalboal; in the northern towns of Carmen, Malabuyoc, and Cordova; and in the cities of Cebu, Lapulapu, and Mandaue.

The outbreak is believed to have started in the first week of April, but a decline was noted this month, he said.

In Bohol, RHO-7 received unconfirmed reports the number of cholera cases there has reached 100.

"The reports we gathered from the government hospitals there said the cholera cases averaged 17 a day," Rodriguez told the INQUIRER.

A report from Bohol Sunday said 85 persons have been downed by gastroenteritis believed caused by contaminated drinking water. Around five cases have deteriorated into cholera eltor, the report added.

The concerned local government units have been advised to monitor the cases of cholera el tor and to promote a clean environment in their respective areas.

Organisms that cause cholera el tor normally spread in areas with poor hygiene, resulting in the contamination of food and water, Rodriguez said.

He also observed rural households generally lack sanitary toilets.

But Rodriguez noted that there have been worldwide cholera epidemics affecting a number of other countries.

Pressed for an explanation, he said: "It just comes and nobody really knows why... probably because it's a cycle."

The DOH in Manila has earlier reported cholera outbreaks in the Bicol region, Cotabato City, and the provinces of Samar, Leyte, Palawan, and Mindoro.

In General Santos, those afflicted have shown symptoms of diarrhea and severe dehydration, which are normally associated with cholera infection, said Florante Magboo, FETP training officer.

In the Bicol region, the DOH has already confirmed 58 deaths due to cholera, while 259 persons were confirmed afflicted. Nearly 2,000 persons are under observation as "cholera suspects."

The DOH main health center has reported two deaths due to severe dehydration in Puerto Galera, Oriental Mindoro, Magboo said.

He said massive rehydration and antibiotics comprise the best emergency treatment for cholera patients. In the absence of these measures, Magboo said, those afflicted with severe diarrhea may take buko (young coconut) liquid or water in which guava leaves have been boiled.

Cholera Epidemic Kills 'At Least' 92 in Northern Samar

BK2006085594 Manila PHILIPPINE DAILY INQUIRER in English 16 Jun 94 pp 1, 10

[Article by Vincent M. Batic]

[Text] Tacloban City—At least 92 persons, mostly children, are said to have died in a cholera epidemic in the remote town of Lapinig in Northern Samar.

"Four children have been dying of cholera every day because of lack of medicine," said Lapinig Mayor Romualdo Menzon in a radio message sent here yesterday to his elder brother, Leyte Vice Gov. Aurelio Menzon.

More than 200 persons have been taken ill and are in desperate need of medicine, the mayor was quoted as saying.

Lapinig is around 200 kilometers from this city.

The vice governor said he has urged his brother to immediately seek help from the Department of Health. He said Dr. Alfredo Perez, head of the Eastern Visayas Regional Health Office [RHO], has ordered a medical team to be sent to the affected area.

Lapinig was one of the Northern Samar towns recently hit by an outbreak of hemorrhagic septicemia, which, killed a large number of carabaos. Residents were said to have fallen ill after eating meat from the infected livestock

But health authorities said it will require a thorough investigation to determine if the two outbreaks are related.

Dr. Lashmi Legaspi of the Cebu RHO said cholera is caused by ingestion of bacteria called *Vibrio cholerae*, which are commonly transmitted by flies from contaminated human waste to food.

Whether the droppings of carabaos afflicted with hemorrhagic septicemia also carry the vibro bacteria has yet to be determined, Legaspi said.

Meanwhile, Dr. Leadrez Tabotabo, a veterinary doctor and head of the Cebu Quarantine Office, explained that while animal droppings may carry the vibro bacteria, these are of a variety different and distinct from the Vibrio cholerae that affect humans.

He agreed that tests are needed to find out if the vibro bacteria are found in droppings of carabaos afflicted with hemorrhagic septicemia.

Gastroenteritis Epidemic Reported in Davao

BK2006140394 Manila THE MANILA CHRONICLE in English 17 Jun 94 p 8

[Text] Davao City—At least 12 persons have died and over 500 others are now suffering from an outbreak of gastroenteritis in the hinterland barangays [villages] here.

Health and social welfare officials blamed contaminated water possibly due to erosion during the rains that caused destructive flashfloods in many parts of Mindanao recently.

City Social Welfare and Development (CSSD) officer in charge of Marilog district of this city said the number of deaths could be higher. Casualties in the hinterland barangays of Marilog, Salaysay, and Magsaysay could have been buried immediately and were not anymore brought to the public clinic in Marilog proper.

A report by barangay officials to Councilor Milo Albeliera, head of the Committee on Sanitation and Health, said that the deaths started 13 June and the number of those affected is still rising.

Even members of a medical team sent by CSSD earlier to check on the epidemic have also been affected by gastro-enteritis.

Dr. Allan Dolor, Marilog District Health Officer blamed unsanitary water as the source for the epidemic. He said residents in Marilog district, mostly Ata-Matigsalog and Bagobo tribespeople, still depend on spring water and wells for drinking water.

Alsa Lee, CSSD head for Marilog, said the water might have been contaminated by soil eroded to the springs and wells due to strong rains in the past weeks.

Lee said Marilog residents were forced to drink untreated water from the spring and deep wells because the clean water from the Davao City Water District is being sold for as high as P3 [Philippine pesos] per gallon.

SINGAPORE

Health Ministry Reports 16 New HIV Carriers

BK3005150894 Singapore Singapore Broadcasting Corporation in English 1400 GMT 30 May 94

[Text] Sixteen new carriers of the HIV virus have been detected in Singapore in the first three months of this year, 13 are males and three females. The Ministry of Health said they were all infected through sexual contact.

To date, 238 Singaporeans are HIV infected, 165 are carriers, 25 have developed full blown AIDS and 58 have died since 1985. The ministry says the most common source of infection is through heterosexual activities.

The Ministry of Health also advised those at risk to go for HIV screening.AIDS Vaccine

THAILAND

Volunteers Start Trial of AIDS Vaccine

BK0606052794 Bangkok THE NATION in English 6 Jun 94 p A5

[Article by Saowalakk Phumyaem]

[Excerpt] Trials of an anti-Aids vaccine produced by a U.S. company will begin on 30 volunteers today, the first such tests in Thailand, a senior Red Cross official said.

Prof Praphan Phanuphak, director of the society's Aids programme, said the volunteers will be inoculated with a synthetic protein which resembles part of the HIV virus and should generate an immunity to the disease.

Praphan said the UBI-1 candidate vaccine is produced by United Biomedical Inc in the United States. The vaccine has been tested experimentally in China and Australia, and on animals and about 100 people in the United States.

The human trials in Thailand, the first of a four planned programmes in developing countries, are under Prahpan's direction, with supervision by Thai Red Cross Society secretary-general Paen Wannamethi and Prof Supphawat Chutiwong, dean of the Faculty of Medicine at Chulalongkon University.

The World Health Organization has approved tests of UBI-1 in four developing countries—Thailand, Brazil, Uganda and Rwanda.

Praphan said experiments overseas had shown the vaccine can build a resistance to infection by HIV, the forerunner of Aids.

The production process for the vaccine was easy and inexpensive.

The programme has been approved by an ethics committee of the Faculty of Medicine, Chulalongkon University, and an Aids research committee at the Public Health Ministry.

He said the trials are intended to determine if the vaccine can generate anti-bodies in the blood or a protein that can destroy the Aids virus in a test tube.

HIV-free volunteers were selected in April from applicants aged 20-50 years old whose behaviour patterns mean they are not prone to HIV infection. Pregnant women were not selected.

The volunteers, 25 men and 5 women, will be vaccinated three times in the first, second and sixth months. Their immune system will be checked eight months after the first vaccination.

Praphan said the volunteers will be divided into two groups of 15 each. Only 12 will be inoculated with UBI-1 candidate vaccine and the rest will get a placebo.

Some of the 12 will receive 100 microgrammes of the vaccine and the others 500 microgrammes, to enable a comparison of the effects.

Those who receive the vaccine will all test "positive", but they will not actually be infected with HIV and hospitals could identify the difference.

The volunteers are being provided with cards stating that their blood will test positive for two years after the end of the experiment.

He said half of the 30 volunteers have a bachelor or masters degree and 70-80 per cent are frequent blood donors. About half of them have already donated their bodies to medical research once they die.

The volunteers are from varying occupations. They include taxi drivers, soldiers, police, engineers, nurses, teachers, lawyers and a Buddhist monk. [passage omitted]

AIDS Vaccine Tests Slated for Discontinuation

BK2306095194 Bangkok BANGKOK POST in English 23 Jun 94 p 6

[Text] Thailand's first HIV/AIDS vaccine tests are expected to be discontinued after it has been found they violate the HIV/AIDS National Vaccine Development Plan.

The Thai Red Cross Society's AIDS programme director, Praphan Phanuphak, earlier this month injected 30 volunteers with an initial dose of the candidate vaccine, GP 120, to test its safety.

A senior official with the National AIDS Prevention and Control Committee said yesterday the AIDS programme had not followed the National Vaccine Development Plan's guidelines which state that any institution testing vaccines should be equipped with laboratories.

The results of the candidate vaccine on the volunteers are not tested by Dr Praphan. They are sent to the vaccine producer, United Biomedical Incorporation of the United States, for testing.

A member of the World Health Organisation (WHO) steering committee on AIDS vaccine development, Nat Phamonprawat, said Thai researchers should carry out any vaccine tests even if the vaccine is obtained from abroad.

He said Thai researchers should head the tests and any foreign researchers should only act as advisers.

Dr Nat said Thailand should set up laboratories to test vaccines so it can obtain maximum information about the results.

The Public Health Ministry's AIDS Division director, Wiphut Phuncharoen said it was unacceptable for the blood of volunteers to be sent to the United States for testing.

"How can we be sure the manufacturing firm is not biased towards its own product?" he asked.

Mr Wiphut said it was the responsibility of the National AIDS Prevention and Control Committee's Data Safety Monitoring Board to look into locally conducted HIV/ AIDS vaccine tests.

The committee chaired by Dr Prasoet Thongcharoen of Mahidon University now cannot function officially because Public Health Minister Athit Urairat has not approved the committee's appointment.

Dr Athit, the chairman of the Sub-Committee on National AIDS Prevention and Control, cannot sign the appointment because he is in hospital.

The deputy chairman of the House Committee on Public Health, Wichai Chaichitwanitchakun of the New Aspiration Party, warned Dr Praphan to stop the tests of the HIV/AIDS vaccine following reports from the US that six of 300 volunteers being tested there have become infected with the deadly disease.

But Dr Wiphut of the AIDS Division said the consent forms signed by volunteers injected with the vaccine in the US clearly states the volunteers were not infected with the virus due to the vaccine.

Dr Wichai said the Red Cross Society should be responsible for the volunteers' health for three to five years after the tests, not simply for the nine months while the tests are being conducted, as side effects may develop later.

He said he would also propose to Parliament that it issue a law providing up to two million baht in social security benefits for medical staff working with AIDS patients.

The Red Cross's Dr Praphan was unavailable for comment yesterday.

Doctor To Continue AIDS Vaccine Tests

BK2806090494 Bangkok BANGKOK POST in English 28 Jun 94 p 2

[Text] The Thai Red Cross Society's AID Programme Director denied yesterday he had violated the National HIV/AID, Vaccine Development Plan and planned to continue with vaccine trials on Thai volunteers.

Dr Praphan Phanuphak said he would give the volunteers a second dose of the vaccine on July 7.

The first dose was administered to 3 volunteers in the country's first ever vaccine trial on June 6.

Dr Praphan said the blood from a third of the volunteers was sent to Chulalongkon University's Medical Department for testing, a third to United Biomedical Incorporation of the United States—the vaccine producer—for testing, and a third was being stored at an independent laboratory ready for dispatch to research places which request it.

"I was one of the members who drafted the National HIV/AIDS Vaccine Development Plan. Why should I violate the plan?" he asked.

There were reports last week Dr Praphan had violated the plan by not setting up a laboratory as part of the programme to test the volunteers.

The doctor said reports of HIV infection among seven volunteers undergoing a similar programme in the United States should serve as a warning to Thai volunteers that no vaccine has yet been able to prevent the infection of the disease.

Of the 30 volunteers here, 24 have been given the actual vaccine while the other six have received a placebo in the form of glucose and water.

Dr Praphan said he had explained the vaccine to the volunteers and had warned them to be careful.

The World Health Organization's Global Programme on AIDS Research and Intervention Development director Peter Piot, said WHO was very disappointed with the decision by the United States not to assess whether vaccines tested at the first and second phase were effective or not.

"There is an urgent need in the world to have a vaccine and we will continue the trial programmes throughout the world, including those being conducted in Thailand, Brazil and Uganda."

Dr Praphan said the decision by the U.S. to postpone the third phase of the vaccine trials would not affect his own tests.

He said the programme required about \$20 million in financial support from the Government so the U.S. had decided to observe the results of vaccine trials in other countries before going ahead with its third phase.

AIDS Vaccine Volunteers Continue Despite Side Effect Rumors

BK0507090794 Bangkok THE NATION in English 5 Jul 94 p A3

[Text] The second injection of an experimental AIDS vaccine was administered to Thai volunteers yesterday despite rumours that similar tests in the U.S. have been suspended, Red Cross Society AIDS Programme Director Praphan Phanuphak said.

Despite fears of harmful side-effects, some of the 30 volunteers insisted that they would not give up the course of injections because they believe the success of the programme could benefit mankind.

Praphan said that since the first injection was given on June 6, none of the volunteers has suffered serious side-effects. "Some of them developed a rash and a bit of swelling, but the symptoms disappeared after two days," he said.

When the experiment is completed, blood samples will be assessed by three separate agencies.

"The developers of the vaccine, United Biomedical Inc (UBI) in the United States, will be sent a set of samples. Chulalongkon University will be supplied a set to check on immune systems, and a third set of samples will be kept by the Red Cross." Praphan said.

He said the society had to report the progress of the experiment to the World Health Organization (WHO) every six months. "After a third vaccination in November, we will be sending samples to UBI in the U.S.." he said.

Praphan said persistent reports about the side-effects of the treatment on volunteers in the U.S. have not put off the Thai volunteers who understand that the test is being carried out in a professional manner.

"Sometimes, reports are exaggerated and inaccurate. But our volunteers are not so easily frightened. Each of them has talks with a psychiatrist before each vaccination," he said.

Sitthichot Kradang-nga, a 25-year-old engineering student, said he suffered only minor pain after the first injection. He said he was depressed at the beginning as his friends tried to distance themselves from him.

"However, I feel better now as I am more and more confident about the programme. I just want every body to understand that I am doing something for society, so please do not let me down," he said.

Phrakhru Baidika Thatsawin, a monk from Hua Hin, said he did not fear that the vaccine would produce undesirable effects on him. "One of the Religious Department's policies is to urge monks to launch anti-AIDS campaigns in their areas. I think being a volunteer in this test will help even more," he said.

Phrakhru Baidika said that initially his mother was afraid he would contract AIDS by joining the programme.

Mac (real name withheld), a 40-year-old soldier, said he is fully aware that the vaccine will not protect him from HIV if his sexual behaviour is unrestrained.

"I haven't had any side-effects so far. I trust the programme. And even if something goes wrong."

Official Reports Deaths Among Hmong Drug Addicts

BK2406090494 Bangkok THAI RAT in Thai 24 Jun 94 p 3

[Text] A source at the Interior Ministry disclosed that intelligence officials at the joint Thai-Lao coordination center reported mysterious deaths among Hmong immigrants receiving treatment for drug addiction at Wat Tham Krabok in Saraburi Province. The deaths were recorded at an average of one every day, or at least five

every week. Death was caused by strong vomiting as a result of herbal medicine taken by drug addicts to cure heroin addiction. The dead were then cremated inside the compound of the monastery. No proper records of the deaths were kept.

According to the report, the Interior Ministry, with cooperation from the European Community, or EC, will on 30 June dispatch a group of 323 Hmong and lowland Lao refugees back to Laos. The EC has cleared a site in Bokeo Province as a settlement area for the refugees, and will provide them with supplies for farming. The project is part of the UNHCR program of repatriation for the Hmong and lowland Lao refugees.

VIETNAM

More HIV-Infected Cases Detected in Lam Dong

BK2706090794 Hanoi Voice of Vietnam Network in Vietnamese 2300 GMT 25 Jun 94

[Text] The Pasteur Institute in Ho Chi Minh City revealed that Lam Dong Province recently detected five HIV-infected cases, and one of them has developed into an AIDS case. The five cases had been transferred with a request for rehabilitation service by the Lam Dong Social Support Center to Binh Trieu Drug Detoxication Center in Ho Chi Minh City.

So far, Lam Dong has had 21 cases of HIV infection, most of them drug addicts. The provincial Preventive Medical Center reported that the rate of HIV infected in Lam Dong is fairly high—21 out of 344 tested samples—and the speed of the infection's spread in the locality is also critical.

'Over 1,400' HIV Cases Reported Nationwide

BK0407131194 Hanoi Voice of Vietnam Network in Vietnamese 1430 GMT 3 Jul 94

[Text] According to doctors who treat sexually-transmitted diseases, the rate of HIV infection among prostitutes and victims of sexually-transmitted diseases is on the rise. As of the end of June there were over 1,400 HIV cases nationwide, including 750 cases in Ho Chi Minh City. The number of HIV carriers who are prostitutes and victims of sexually-transmitted disease increased from 30 to 50. [sentence as heard] In Ho Chi Minh City, supervision and interrogation activities are being urgently developed in an effort to limit the spread of HIV.

Dinh Quan District Halves Number of Malaria Cases

BK0706123294 Hanoi Voice of Vietnam Network in Vietnamese 2300 GMT 6 Jun 94

[Text] Since early this year, the medical authorities Dinh Quan District have on four occasions soaked mosquito nets with chemicals and sprayed insecticide for the people living on its 15 communes and on state farms. Over 4,500 people have been issued preventive medication and over 4,000 mosquito nets have been soaked with chemicals. Only 400 cases of malaria have been reported in the district in the last five months; this is half the number of the same period last year.

Son La Province Faces 'Alarming' Malaria Situation

BK2306102194 Hanoi NHAN DAN in Vietnamese 7 Jun 94 p 3

[Article by Nguyen Khoi entitled: "Malaria Situation in Son La Is Still Alarming"]

[Summary] Son La is no longer considered a disease-infested jungle, but its rate of malaria infection is still one of the highest of the country. "The Son La Malaria Station revealed that in the first quarter of 1994, there have been 5,500 malaria patients admitted to hospitals and medical stations; six of them have died. The officials also said that since 1992, the disease did not break out in major epidemics anymore, but the number of patients still increased at a steady pace. In 1993 nearly 50,000 local people suffered from malaria (9.4 percent more than 1992) with 412 serious and 72 fatal cases."

Together with goiter, malaria causes grave concern for both local and central level authorities, especially for the two highland districts of Thuan Chau and Song Ma. The two main reasons for the current situation are the poor and unhygienic living conditions of local people, especially of ethnic people living in mountain tribal hamlets, and the dearth of medical facilities network in the province. In 1993, 1.7 billion dong was spent on antimalaria programs, in addition to thousands of mosquito nets donated by the Red Cross and UNICEF agencies. The Son La Malaria Station has a mobile paramedic team with 20 staff who cooperate with medical stations of districts in anti-malaria programs. So far the funding and the personnel allocated to fighting malaria in Son La have proved to be insufficient.

With 300,000 people presently suffering from malaria (about 40 percent of the local population), the situation has become so alarming that public health authorities, charities, social and other mass organizations are urged to act urgently to stop the harmful disease.

BULGARIA

Chief Epidemiologist Gives Figures on AIDS, Sexual Diseases

AU2706184594 Sofia BTA in English 1702 GMT 27 Jun 94

[Text] Sofia, July 27 (BTA)—Anti-AIDS '94 is a campaign for AIDS prevention and promotion of condom use. It is organized by the National Centre for Health Prophylaxis, the Central AIDS Laboratory, the Bulgarian Red Cross and the nongovernmental organization Bulga. The campaign is part of an international campaign called "Europe against AIDS—Summer 1994—Flying Condom."

The idea of the campaign is to enhance awareness of AIDS and safe sex and foster positive attitudes to the use of condoms. It is targeted at young people, Bulgarian and foreign tourists. The campaign will involve musicians, singers and actors and will cover tourist, amusement and recreation facilities, airports, railway stations and sea terminals in Sofia and along the Black Sea coast.

This is the third Anti-AIDS campaign to be organized in Bulgaria in the last three years. Seventy per cent of the respondents aged between 14 and 60 in a poll which the organizers conducted in Sofia after the end of the 1992 campaign said they never or almost never used condoms, and only 10 per cent said they did.

According to the latest statistics, there are 129 HIV-positive persons in Bulgaria, said Dr. Svetoslava Popova, epidemiologist general. She stressed that this figure cannot be reliable because the only way to detect AIDS-infected people is voluntary tests. Mandatory AIDS tests in Bulgaria apply only to foreigners who come to work or study here.

Experts' projections of the spread of AIDS in Bulgaria are based on the incidence of other sexually transmitted diseases. Dr. Popova said that the 900 new syphilis cases registered last year were some 300 more than in 1992. Most persons infected with syphilis are aged between 20 and 29, closely followed by the 15-19 age group. At the same time, the incidence of gonorrhea is declining, which is an indication that patients treat themselves or resort to the services of private practitioners, Dr Popova said.

Mandatory Diphtheria, Tetanus Vaccination Imposed

94P20876B Sofia KONTINENT in Bulgarian 2 Jun 94 p 2

[Article by Nadelina Aneva: "Revaccination Against Diphtheria Becomes Necessary"]

[Text] A collegium at the Ministry of Health [MZ] has decided that mandatory reimmunization with a new tetanus-diphtheria vaccine should be introduced for people aged 17, 25, and 35. Children aged 12 should also

be vaccinated with a new vaccine in which the quantity of tetanus antitoxin predominates.

The Ministry of Health adopted measures for the new reimmunizations because of the unfortunate outcome for five of the six Romany (Gypsy) children from Sliven who were not immunized and contracted diphtheria toward the end of last year.

A precise list of counter-indicators for various vaccines has been compiled. Until now, the absence of such criteria has led to considerable noncompliance with mandatory immunizations. Large-scale refusal to be reimmunized against tetanus has led to fatal cases every year. According to experts at MZ, the last such case was in May in Pleven, where a child died.

The health authorities are assisted by the police in carrying out the mandatory immunizations.

Cases of Polio Among Romanies

94P20876A Sofia TRUD in Bulgarian 2 Jun 94 p 1

[Article by Mira Radeva: "Danger of Infection: Little Boy Dies of Infantile Paralysis"]

[Text] A 19-month-old boy with a high fever and paralyzed legs died at the amalgamated hospital in Sliven on Monday. Dr. Tanya Kamenova, chief expert at the Ministry of Health, told a reporter from TRUD that the clinical diagnosis made by the medical team was unambiguous: poliomyelitis, or infantile paralysis. Specimens were taken from the dead child for virological tests, and the results will be known in 15 days.

Dr. Kamenova said that the child, Asencho, lived on Kara Kol'o Street in the Romany (Gypsy) quarter in Sliven. For 20 years, there had been no cases of polio in Bulgaria, but on just this street a year ago there was an explosion of cases of this serious disease, and its first victims were neighbors of the child who died on Monday. Altogether, infantile paralysis has struck 43 children throughout the country. Of the victims, 41 were Romanies, as was the dead child. This infection remains very dangerous. To avoid it spreading from those who had contact with Asencho, it is necessary for them to be vaccinated against infantile paralysis. The Romanies in Sliven, however, are apparently accusing the doctors of having killed the little boy and will not allow the health worker to enter the quarter or Kara Kol'o Street. The health workers from the hospital have requested special assistance from the mayor of Sliven and for the police to handle the situation in order not to have an epidemic.

CZECH REPUBLIC

Article Analyzes AIDS, HIV Figures, Trends in Republic

AU2106080694 Prague LIDOVE NOVINY in Czech 18 Jun 94 p 1

["(pech)"-signed and CTK report: "AIDS: The Rich Countries Must Help the Poorer Ones"]

[Excerpt] [passage omitted] There are 188 HIV-positive cases in the Czech Republic at the moment. Some 48 people have already developed full-blown AIDS, 29 of whom have died. Of those infected, 110 were homosexuals; 29 were heterosexuals; 14 were infected during a blood transfusion at a time when no tests were carried out for AIDS; 17 were hemophiliacs; and two were intravenous drug addicts. The origin of the disease in the remaining 16 is unknown. It serves as a warning that, while the rise in incidences among homosexuals is falling, it is possible to distinguish the opposite trend among heterosexuals. At the moment, it is impossible to discern a relevant rise in HIV infection following the opening of the borders because of the long incubation period for AIDS. Dr. Walter from the Czech Republic Chief Health Officer's Department has said that negative development can be anticipated in conformity with the occurrence of new syphilis cases in 1991.

Number of Czech HIV Sufferers Rises to 190 in June

LD2106111394 Prague Radiozurnal Radio Network in Czech 1000 GMT 21 Jun 94

[Text] Another two Czech citizens were diagnosed as HIV positive in May. On 31 May, 188 people were diagnosed as HIV positive. Of those, 48 people suffer from full-blown AIDS. Of the two persons who were newly diagnosed as HIV positive, one was infected by a heterosexual and the other by a homosexual contact.

Report Examines Reasons for Fall in Annual Death Rate

AU2406191494 Prague MLADA FRONTA DNES in Czech 21 Jun 94 p 2

["(zv, rea)"-signed report: "The Number of Deaths in the Republic Has Declined Over the Past 15 Years"]

[Text] Prague—Over the past few years, fewer people have been dying each year in the Czech Republic. While in 1980 most people died—more than 135,000—10 years later this figure was 129,000 and last year it dropped again, by just under 11,000. According to the demographers, who drafted a report for the Czech Statistical Office, this situation is caused, first and foremost, by the fact that, at the moment, the so-called weak population age groups—that is, citizens born during World War I and shortly after it—are living to the age of the average life expectancy.

Another reason for the declining number of deaths is the slight increase in average life expectancy. At the moment, this is just under 69 years for men and just over 76 years for women; despite this, however, it is still one of the lowest in Europe. Among Western Europeans, the inhabitants of the Scandinavian countries, the Netherlands, and Switzerland—where men usually die around the age of 75 and women at approximately 80—live, on average, the longest. On the other hand, the Portuguese

have the shortest life expectancy in Western Europe. Here, nien live until just under the age of 70, while women live more than 77 years.

People in the Czech Republic die most often from diseases of the circulatory system, which are the cause of 56 percent of all deaths; at the same time, this figure is the highest in Europe. Czechs also die often from myocardial coronary thrombosis, coronary ischaemia, and vascular brain disorders. Of course, the statistics show that fewer people are dying each year as a result of these illnesses. On the contrary, the number of those whose death is caused by malignant diseases and diseases of the nervous system is rising constantly.

YUGOSLAVIA

Infectious Diseases Spreading in Kosovo

94BA0303A Trieste REPUBLIKA in Slovene 25 May 94 p 7

[Article by Blerim Shala: "Infectious Diseases Spreading in Kosovo"]

[Text] Pristina-Official Serbian sources have reported that during the past five years 43,221 citizens have contracted contagious diseases. Among them, 679 died of typhus, dysentery, and tuberculosis, which are now almost unknown in the "civilized" world. The poor health situation is also shown at the Pristina gynecological clinic, where all 46 Albanian gynecologists were dismissed in 1990 for performing "special measures." In the last three years 2,284 newborn children have died at that hospital, which constitutes 15 percent of all those born in that institution. Albanian sources claim that Serbia has to allocate 1.5 million German marks a day to maintain its administrative and military apparatus in Kosovo. It has therefore built up the financial oversight services in Kosovo, which will try to monitor more rigorously the monetary transactions of Albanian small businessmen, who retain 99 percent of Albanian small business in their hands. According to the official data, Serbia is supposed to be collecting DM187.7 million in Kosovo annually through taxes alone.

Sanctions Seen Jeopardizing Health

AU3005171094 Belgrade NIN in Serbo-Croatian 27 May 94 pp 10-12

[Article by Vesna Kostic and Aleksandra Bilanovic: "The Rigging of Life"]

[Excerpt] Infant mortality has climbed to 21.7 percent in 1992, while mortality among diabetics has doubled. Every other child in Belgrade is anemic; out of every 100 children hospitalized in 1989, 1.45 died, while last year this number climbed to 2.07. In the first year of the embargo, mortality among old people increased from 501 percent in comparison to the distant 1986.

REGIONAL AFFAIRS

Central American Health Report Through 1 July PA0207132994

[Editorial Report] The following is a compilation of reports on Central American public health and epidemiologic developments monitored through 1 July.

Honduras

AIDS—Health authorities confirmed 60 new AIDS cases in May, which brings the total number of cases to 3,591. After Brazil, Honduras has the greatest number of AIDS cases among Latin American countries. (San Pedro Sula TIEMPO in Spanish 25 Jun 94 p 2)

Mexico

AIDS/cholera/malaria—Health Secretary Jesus Kumate Rodriguez said AIDS, cholera, and malaria are the country's biggest health problems. He added that among those diseases, AIDS is the most difficult to control, but there are fewer cases this year than last. There were 6,000 cholera cases in 1992, 12,000 in 1993, and 1,000 cases so far this year. In 1989 there were 110,000 malaria cases and 94,000 in 1993. (Mexico City NOTIMEX in Spanish 1856 GMT 30 Jun 94)

Nicaragua

Cholera—Health Ministry statistics show an average of 12 cholera cases per day or 84 cases per week, 19 of which require hospitalization. At least eight people die from cholera every month, with 52 dead so far this year. Yesterday, 21 new cholera cases were reported. More than half of them were in Managua, which has a yearly total of 2,156 people. (Managua Radio Sandino in Spanish 1200 GMT 30 Jun 94)

Panama

AIDS—The Children's Hospital director reports an alarming increase in AIDS cases among infants, with 19 cases so far this year. That is the same number of cases registered for the entire year of 1993. Four cases were detected in 1988, and six infants were infected in 1989. (Mexico City NOTIMEX in Spanish 0224

BOLIVIA

Church Group Releases Leishmaniasis Figures

94WE0285A La Paz PRESENCIA in Spanish 10 May 94 p 8

[Text] In La Paz and Beni there are 596 active leishmaniasis cases lacking adequate treatment. Most of the cases have not received suitable care; for this reason, an epidemiological crisis is feared.

A recent investigation conducted by the Reyes Vicar's Office made it possible to determine that, "during recent

months an alarming increase has occurred in the number of leishmaniasis victims. The outbreak has begun assuming epidemic features, attesting to the inadequacy of the health system and that of the NGO's [nongovernmental organizations] in the region to control and treat it."

This claim is made by the church's social development and action institution, Caritas Boliviana. It explains that, between 18 and 24 April of this year, health personnel from the Reyes Vicar's Office, backed by the Caritas Boliviana 'lealth and Assistance Department, conducted an investigation covering 37 communities in the Sud Yungas (La Paz) and Ballivian (Beni) Provinces.

Conclusive Data

Out of 740 households existing in the area investigated (including 3,700 persons), 421 homes with at least one family member stricken by leishmaniasis, in its various phases, were polled. It was then found that 1,179 persons (31.8 percent) had previously suffered, or were suffering from that disease.

Of that number, 376 persons (31.9 percent) showed an active initial lesion, none being treated; while 803 persons (68.1 percent) had an already healed cutaneous lesion.

The Caritas Boliviana document notes: "Of those 803 persons, 30 percent (241) claimed not to have received any treatment; 25 percent (201 persons) said that they had been cured by using only natural medicines; and 9.9 percent (80 persons) reported that an average of eight glucantime capsules had been used to cure them. This prompts us to assume that they received incomplete treatment."

The investigation also concluded that only 34.9 percent (281 persons) were given a course of treatment with 60 capsules: the number recommended by the Bolivian Institute of Biology of the Highlands (IBBA), subordinate to the National Health Secretariat.

None of those 803 patients, including the 281 persons treated adequately, mentioned having had a laboratory followup to determine the real level of their recovery and control.

The church institution further states that, in addition to the 376 cases showing an active initial lesion, there are 220 with an active cutaneous lesion recorded by the Vicar's Office health services in the other Ballivian (Beni) and Iturralde (La Paz) Provinces. This makes a total of 596 active cases currently lacking adequate treatment.

Alarming Situation

Caritas Boliviana maintains that these data prove the situation to be alarming. "Not only is there a large number of recent untreated cases, but the magnitude of

the problem stems from the fact that 65 percent of those polled who showed a scar from the initial lesion had not been treated adequately.

"This has prompted our statement that we shall inevitably have an epidemiological crisis, typified by the presence of over 800 cases in the mucous and/or cartilaginous phase." Meanwhile, the health authorities are minimizing the situation, providing data that do not concur with the reality.

The document concludes by claiming that, to counteract the danger, apart from the cure, there must be an expansion of the preventive educational work on the part of the Reyes Vicar's Office.

Incidence of Cholera Nationwide Decreases

94WE0285B La Paz HOY in Spanish 5 May 94 p 6

[Text] With fewer resources than some of its neighbors, Bolivia has nearly defeated cholera; and although the threat of this disease will remain latent for many years to come, the educational campaign aimed at the population is expected to suffice to dispel the fear of its presence. Between January and April of this year, 2,300 cases appeared; in 1993, the number reached 8,547; whereas, last week, 39 cases were reported, 26 of them in Santa Cruz.

Yesterday, the National Directorate of Epidemiology announced that, in the first four months of 1994, the cholera cases recorded declined more than two-thirds from the number reported during the same period last year.

Between January and April of this year, 2,390 [as published] cases appeared. In 1993, there was a total of 8,547

Johnny Mollinedo, national director of epidemiology, commented: "There are virtually 3.5 times fewer cases than last year." He underscored the success of the educational preventive measures aimed at the population.

He added: "We are unquestionably better off than other countries. Peru has far more cases than we do, and so does Guatemala."

The last outbreak in Peru produced approximately 50,000 victims, compared with the 2,500 recorded in our country.

The cholera death rate has also dropped, from four percent last year to 1.8 percent this year.

Goodbye to Outbreaks

Last week, 39 cholera cases were detected, 26 of them reported in Santa Cruz, nine in Tarija, two in El Alto, and one each in Cochabamba and Tupiza. During this same epidemiological week in 1993, 150 cases were detected.

Mollinedo remarked: "This means that all the educational information given to the population is having an effect."

He added that, nevertheless, the week before an appreciable number of cases appeared in Chuquisaca. However, none have been discovered within the past few days; and it is only in Santa Cruz and Tarija that more than 10 per week have appeared. He claimed that none of these have become critical.

A short time ago, the main focus of cholera was located in Yacuiba, but it was controlled during February. From 80 cases per week, its incidence has declined to no more than four.

Mollinedo explained: "It is becoming colder, and the temperature is dropping: another indication that the number of cases will decrease. But this is not the only reason explaining the decline in cases; rather, the population is taking the preventive measures more seriously."

The official also noted that there are currently no active focuses of cholera.

Three Outbreaks of Cholera

Since cholera appeared in the country, there have been three outbreaks in which the largest numbers of cases were reported.

The first was detected during the early months of 1992; the second, in November of the same year, lasting until March 1993; and the third, the smallest, occurred in November 1993. Its highest point came in November, when 1,849 cases appeared. At that point the epidemic curve began to decline, to a low during April and early May of this year.

Mollinedo declared: "There is an obvious tendency toward a reduction, and toward not having any more cases reported in the country."

He added: "If we view the cholera outbreaks comparatively, the first one was the most extensive, in which the most cases were detected. With the second outbreak, a considerable reduction was detected; and, with the third, the decline was considerable, compared with the previous ones."

Our Faithful Companion

However, though cholera seems to have been nearly conquered, it will not abandon us.

Mollinedo claimed: "Cholera is an endemic disease, which we shall find very difficult to eliminate because of the substandard basic sanitary conditions in the country, especially in the rural and outlying urban areas."

He added: "Until an interinstitutional activity is achieved to improve the basic sanitation conditions, cholera will remain with us for a long time, for many years to come."

CUBA

AIDS Patients Total 1,046; 177 Deaths Recorded

FL0307235594 Havana Radio Rebelde Network in Spanish 1700 GMT 1 Jul 94

[From the "National Radio News"]

[Text] Dr. Reinaldo (Gil) Suarez, director of the National AIDS Control and Prevention Program, advised that 177 deaths have occurred in Cuba as a result of AIDS since the illness was detected in Cuba during the mid-eighties. Suarez added that, according to latest figures, 1,046 people are infected, 87 of whom have full-blown AIDS. The age group most affected is still between 20 and 29 years of age. The fundamental cause is unprotected promiscuous sexual conduct. He advised on the patients' conditions, complicated in some cases, but normal in the majority, who are being treated at 13 Public Health Ministry hospitals. Suarez pointed

out that government and Communist Party of Cuba leaders continue to give priority to the program. This allows some results to be achieved, as well as allowing for studies to be made, improving diagnosis, and advancing understanding of the virus, Suarez stated.

MEXICO

Mexican Health Report 17 June

PA1806025094

[Editorial Report] The following is a compilation of reports on Mexican public health and epidemiological developments monitored through 17 June.

Health Secretary Jesus Kumate said on 16 June said that AIDS cases dropped 5 percent in the past year. (Mexico City XEW Television Network in Spanish 0430 GMT 17 Jun 94)

ALGERIA

Annaba: Number of Typhoid Cases Up

94WE0296A Algiers LE SOIR D'ALGERIE in French 16 May 94 p 3

[Article: "Annaba: Typhoid Fever Is Back"]

[Text] Typhoid fever, which first appeared in the 2,000-bed university residence hall in the Annaba suburb of Sidi Amar two months ago—in the month of Ramadan, to be exact—has not been completely eradicated, with the result that it is continuing to cause concern, particularly in the university community and in the patients' families. New cases of typhoid fever are being reported in Annaba and Skikda. Those afflicted are all students, and most of them are not dormitory residents, according to official university sources.

According to physicians, the first case of typhoid fever in Skikda was discovered last February in a young man from Skikda who was studying at Annaba University.

"The number of patients was up to 20 by the end of Ramadan. In view of that situation, we alerted all the parties concerned," the physicians explain.

They go on to say that while it is true that a slight decline in the number of cases occurred, it appears that the measures adopted were not properly carried out because the number of patients then rose again. They say that no fewer than 48 cases were recorded between 6 April and 2 May, bringing the total to 68 cases.

Dergana: 'Serious' Outbreak of Typhoid Reported 94WE0299A Algiers EL WATAN in French 25 May 94 p 5

[Article by F.M.: "Dergana: 75 Typhoid Cases"; first paragraph is EL WATAN introduction]

[Text] The Dergana region east of Algiers is experiencing a serious typhoid epidemic. Since last Thursday, 75 residents of that locality have been stricken by typhoid fever and admitted to El Kettar Hospital.

On Monday, noting the spread of the disease, the Local Executive Office (DEC) of Bordj El Kiffan issued a communique calling upon the residents to boil drinking water before using it in order to prevent "any danger of an epidemic."

Why did the DEC fail to go all the way and inform the residents that typhoid fever had appeared? That is an essential question, considering that the DEC noted in its appeal that Dergana's water supply system was "subject to probable infiltration by sewage."

That "probable infiltration" turned out to be very real. The director of prevention at the Ministry of Health reported yesterday that the epidemic was due to the water's contamination by sewage. "The infiltration occurred because of failure to check the PVC pipes that

had been installed and the manual and irregular application of chlorination," he added in a communique. The automatic system installed in the water tower was not working because of a power outage.

Was that breakdown noted in time? The Ministry of Health points out that the Dergana water supply system was installed with no regard for existing standards (for example, the requirement that cast iron pipes be used).

In its appeal to the public, the DEC instructed residents to continue boiling their drinking water until completion of the renovation work "currently under way" on the AEP [Potable Water Supply] system. Several dozen cases of typhoid fever have been regularly reported in the city since 1990. Physicians attribute those epidemics to the poor design of the sewage systems, which straddle the drinking water systems. Last year 30 people fell victim to typhoid fever in that city.

Last, there is reason to wonder about the DEC's delay in warning the public of the danger it was facing, considering that the first cases were admitted to El Kettar Hospital on Thursday. There must be negligence somewhere, since the communique by the Bordj El Kiffan DEC was not published until Monday. The abundant use of water for the Aid El Adha sacrifice, which was celebrated on Saturday, could have constituted sufficient reason for local authorities to intervene. Public health seems to be the poor relation in certain communes.

INDIA

'Substantial Increase' in AIDS Cases; Northeast Hardest Hit

BK0206151694 Delhi Doordarshan Television Network in English 1630 GMT 1 Jun 94

[Text] There has been a substantial increase in the number of AIDS cases being reported in the country, with seven of every 1,000 people diagnosed HIV-positive. Most of the AIDS cases coming to light are from the northeastern states, with Manipur recording the highest number of cases. We have this report: [begin recording]

Unidentified correspondent: The seven northeastern states account for approximately 2 percent of the total populations of the country, but they account for more than 16 percent of the country's AIDS cases. It is estimated that there are over 4,000 [figure as heard] HIV-positive cases in the country, with Manipur accounting for more than 2,500. The reason for this is not sexual promiscuity but the high rate of drug addiction. The sharing of needles used for injecting drugs intravenously is the primary cause for the spread of this disease. Drugs come into this region from the Golden Triangle. The vulnerable group that is affected is between the age group of 17 and 35. A lack of awareness about the disease and the high unemployment rate are other factors complicating the issue. The National AIDS

Control Organization has been involved in an AIDS prevention and education campaign to arrest the spread of this disease.

Unidentified official: We have started working with UNICEF and Nehru Yuva Kendras [Youth Centers] to train representatives of about 800 youth clubs in Manipur. This is general thing. This is not targeting the drug abusers as such, but taking the youth as a segment. [end recording]

Dysentery Outbreak Threatens To Wipe Out Pahadi Korba Tribe

BK3105132394 Delhi INDIAN EXPRESS in English 27 May 94 p 3

[Excerpts] Raipur—The Pahadi Korba tribals of Surguja district in Madhya Pradesh appear to be on the verge of extinction as dysentery is claiming lives at a fast pace.

About 20 Pahadi Korbas of Batoli Development Block in the district died of dysentery recently. The elders fear their number would fall, leading to their extinction soon.

During the Emergency period, some health officials and workers had forced Pahadi Korbas to undergo family planning operations, which left a few of their tribe in the State. [passage omitted]

Pahadi Korbas live in thick forests on hills and their villages are also very small. A maximum of 40 families live in each village. They have never come across a doctor or medicines.

However, some relief work by medical team presently is going on at village Amapani. Some Pahadi Korbas are suffering from dysentery in Ghatvapara and Kadamhava but no doctor has reached there.

Doctors claim they had arranged adequate medicines for Pahadi Korbas. Whatever medical care is now available, came only after April 26, when some scribes of Surguja district visited different villages on foot and reported the facts.

Primary Health Centre Batol in-charge said they had sent adequate medicines and posted one A K Singh in Amapani. However, Amapani Korbas said that the doctor had not visited the village even once after the dysentery outbreak.

Subordinate staff makes no secret that only oral dehydration powder is supplied in the guise of medicine.

Both male and female health workers claim they had informed about outbreak of dysentery on April 15 to their high officials while the officials took action only on April 26.

Some 296 New Cholera Cases Reported in Delhi

BK2706125094 Delhi INDIAN EXPRESS in English 24 Jun 94 p 3

[Text] New Delhi—Cholera cases have doubled this month, with a total of 296 cases reported till Thursday

from various parts of the Capital. According to the MCD [expansion unknown], there is, however, no cholera death reported in June.

Senior MCD officials said a total of 296 cholera cases were reported so far as against 127 cases reported in June last year. The gastroentritis cases have touched a figure of 5062 as against 7884 cases reported last June.

Officials say though the number of cholera cases is on the rise but the situation was under control as the cases were scattered in 135 colonies and the disease had not reached epidemic proportions in any of them.

PAKISTAN

Number of Cholera Deaths in Karachi Increases

BK0606135694 Karachi DAWN in English 2 Jun 94 p 1

[Article by Samina Mehdi]

[Excerpt] Karachi, June 1—At least 10 people have died of cholera at the emergency ward of the Civil Hospital during the last three weeks, with a rise in the number of reported cases of the dreaded disease.

Doctors handling these patients say that in severe cases a patient may die of dehydration and loss of body electrolytes and suggested that it was important to recognise early signs of cholera in a person and seek medical help for him.

They also identified various areas hit by cholera epidemic and said that contaminated water and flies were major cause of the spread of the epidemic.

According to them, the areas in and around Ranchor Lines, Lyari, Kharadar and Khadda were hit by cholera, as majority of patients coming to the hospital were residents of these areas.

People living in congested localities and slum areas all over the city are also reportedly suffering from cholera.

At the Aga Khan University Hospital [AKUH], more than 20 serious cases of cholera have been reported during the last three days.

Since majority of these patients at AKUH came from Karimabad and Aminabad areas, these places are also being considered as cholera-hit.

The situation at other major hospitals—Jinnah Postgraduate Mdical Centre and Abbasi Shaheed Hospital is also similar. [passage omitted]

SRI LANKA

Estimated 6,000 People HIV-Positive, 125 Full-Blown AIDS Cases

BK2206132094 Colombo DAILY NEWS in English 13 Jun 94 p 1

[Text] An estimated 6,000 people in the island are infected with AIDS (Human Immunodeficiency Virus

Positive) and over 125 have contracted fully blown AIDS, a venerealogist from the Bureau of Sexually Transmitted Diseases told the Daily News.

Although Lanka's first case of AIDS was that of a foreigner detected in September 1986, the spread is almost entirely indigenous and those mostly at risk are drug addicts, prostitutes and their sexual partners.

Most AIDS cases have been detected in and around Colombo since this is where AIDS testing facilities are available, the venerealogist said.

He added the bureau commenced 'sentinel surveillance' in 1990 by way of venereal diseases clinics in Ratnapura, Kurunegala, Colombo and Kandy among others but those infected fight shy of seeking treatment since the nature of the disease accounts for socially unacceptable behaviour.

"However, we are adopting various techniques to test potential HIV positive carriers but we will not disclose these methods for fear of scaring them away," he explained.

He added that all blood donors in the island are systematically screened for HIV positive and there is absolutely no danger of contracting AIDS through blood transfusion.

Meanwhile AIDS analysts have issued a warning that drastic measures are needed to control the spread of the disease which is estimated to be increasing by six percent or 200 infections annually.

There is still a greater need for AIDS awareness and funds and services to treat and control the spread of AIDS are sadly lacking, according to the venerealogist.

RUSSIA

Amendments to AIDS Prevention Law Considered

PM2705132994 Moscow NOVAYA YEZHEDNEVNAYA GAZETA in Russian 26 May 94 p 2

[Yelena Afanasyeva report under the "Health" ruric: "AIDS Is Not Dormant, but Duma Is Not Dozing Either"]

[Text] At the present moment the human immunodeficiency virus infection [AIDS] has been diagnosed in 740 citizens of the Russian Federation, of whom 281 are children; 105 have died, of whom 64 are children. There are also 450 infected foreigners registered. Specialists consider that as of today there are around another 1,000 people who are unaware of being infected.

The majority of the infections occur in hospital and are introgenic. Despite this, norms introduced into the Criminal Code in 1987, prescribing deprivation of liberty and fines for infecting anyone with AIDS, are still in force in Russia.

This information was made public at parliamentary hearings on the draft federal Laws "On Preventing the Spread of the Human Immunodeficiency Virus (HIV Infection) in the Russian Federation" and "On Introducing Changes and Amendments to the RSFSR Criminal Code" held by the Duma Committee for Health Care. The draft laws submitted have been drawn up on the basis of similar laws adopted in other countries and prescribe measures to prevent infection and protect the rights of sufferers, and stipulate medical workers' liability for causing infection.

Under the new draft law, donors (of blood, other bodily fluids, organs, or tissue), foreign citizens and persons without citizenship residing in the Russian Federation for more than one month, and citizens of the Russian Federation are subject to compulsory medical examination if there is the threat of large-scale HIV infection.

A separate section of the draft stipulates the social protection afforded infected persons and the members of their families, which means that it is not permitted to dismiss them, to refuse to hire them for work or enrol them for study, or to commit any other infringement of their legitimate rights and that compensation must be paid for any damage caused.

The draft law introducing changes and additions to the RSFSR Criminal Code proposes to punish those responsible for causing infection with a "fine equivalent to 50 times the minimum wage" or "deprivation of liberty for up to three years." If such action should lead to the death of an individual, punishment in the form of deprivation of liberty for up to seven years is proposed.

Bella Denisenko, chairman of the Duma Committee for Health Care, insisted on toughening up the punishment for those guilty of causing HIV infection resulting in death and on increasing the term of deprivation of liberty to a maximum of 12 years.

Vadim Pokrovskiy, leader of the Russian AIDS Prevention Center, reported during the hearings that the incidence of infection of Russians today is tens, even hundreds of times lower than elsewhere in the world. Pokrovskiy considers that the measures proposed in the draft laws are sufficient to maintain the existing state of affairs.

Duma Health Official Releases AIDS Statistics

LD2405205994 Moscow INTERFAX in English 2014 GMT 24 May 94

[Text] A total of 740 Russians, including 281 children, have been diagnosed HIV positive. A total of 105 people, including 64 children, have already died of AIDS. Another 450 foreigners on Russian territory are known to have the virus.

This data was presented in Moscow Tuesday at parliamentary hearings on the draft federal laws "On Preventing the Spread of HIV in the Russian Federation" and "On Introducing Changes and Addition to the Criminal Code of the Russian Federation" by Chairperson of the Duma Health Committee Bella Denisenko (Russia's Choice).

She said that a significant proportion of infections were caused in hospitals as a result of mistakes by medical staff.

Participants in the hearings said that another thousand or more people were probably infected without knowing it

Leader of the Russian AIDS center Vadim Pokrovsky said that 24 million Russians were tested each year for HIV. He said that too many occupations were subject to compulsory testing (such occupations include: sailors, fishermen, workers at pharmaceutical plants etc.)

The draft law envisages compulsory testing of donors of blood, biological fluids, organs and tissues and also foreign citizens and people without citizenship who arrive in Russia for more than one month.

The list of occupations liable for compulsory testing should be reconsidered by the Russian government every five years.

Denisenko said that the punishment for spreading the HIV virus should be increased and the Criminal Code be changed to include punishment from 5 to 12 years and a ban on occupying certain posts for 1 to 5 years.

Tajik Refugees Bring Risk of Lice-Borne Diseases to Yekaterinburg

94WE0302A Moscow KOMMERSANT-DAILY in Russian 21 May 94 p 21

[Article by Viktor Smirnov: "Evacuation of Refugees from Yekaterinburg—Municipal Authorities Frightened by Epidemics"; first paragraph is KOMMERSANT-DAILY introduction]

[Text] Fearful of an outbreak of infectious diseases, Yekaterinburg administration took action to evacuate 250 Tajik refugees begging on the city streets. The last group of refugees was placed on a long-distance train yesterday under the supervision of the militia and sent back to their homeland.

According to the information of law-enforcing agencies. Tajik refugees arrived to Northern Urals more than six months ago from the village of Tugulanskiy in Kurgan-Tyubinsk Oblast of Tajikistan. Upon their arrival, they refused the suggestion of the local migration center to acquire the official refugee status and make a permanent residence in a rural rayon of Sverdlovsk Oblast, where the authorities were willing to offer them vacant houses and financial aid to engage in farming. The refugees were quite satisfied to be beggars, and according to data of the militia each of them collected up to 25,000 rubles per day from passers by.

After inspecting the temporary residences of the Tajik citizens (in a few private homes, a school undergoing repairs, and the railroad station), representatives of the sanitary and epidemiological service were literally horrified. Several dozen refugees lived in small private homes, and they had transformed the grounds into a garbage dump. Physicians found lice on virtually all of the refugees. In the opinion of the chief State health inspector [physician] of Yekaterinburg, Vladimir Chirkov, there was a real danger of diseases spreading in the city that were not typical for the Urals: typhoid fever, typhus, plague and cholera.

The city administration asked the Tajiks to leave the city as soon as possible. In spite of the dissatisfaction of train conductors, within a few days all 250 refugees were sent to Tajikistan in small groups, under the supervision of the militia. Telegrams were sent beforehand to all of the major stops along the train's itinerary, with the request to check that the Tajiks would reach their destination.

The administration of Yekaterinburg took immediate steps to develop a local legislative document regulating residence of refugees in Yekaterinburg.

Incidence of Diphtheria Increasing in Russia

LD2206082294 Moscow 2x2 Television in Russian 0730 GMT 22 Jun 94

[Text] Urgent measures to combat diphtheria were discussed today by the Russian Federation Security Council's interdepartmental commission for health protection. In just the first four months of this year about 8,000 cases have been registered, which is 3.5 times more than in the same period of 1993. According to scientists' forecasts of four years back, diphtheria and also measles, German measles, and tetanus may get out of control.

Firm Proposes Clean Water Program for Russia 94WE0253B Moscow TRUD in Russian 13 Apr 94 p 2

[Article by Svetlana Sukhaya under the rubric "Our Health": "A Glass of Water"]

[Text] It is April outside, spring. The snow is melting. A goodly amount of impurities is penetrating into the reservoirs. This means that the water flowing from our taps is beginning, to put it mildly, to have a slight smell.

According to the latest information from Roskomvod [Russian Water Commission?] and the RF Committee for Public Utilities, about 75 percent of surface water of Russia are not fit for use as sources of centralized water supply without complicated and expense treatment of the water. In simple terms, we can no longer take a drink of water without risk to our health. There is nothing surprising about this, after all, one cannot spit in the well for a long time and remain unpunished. In 1992 about 28 cubic kilometers of polluted sewage was dumped into bodies of water, and since then the situation is only worsening.

In our country, water treatment is extremely poor: the treatment plants have been obsolete for a long time. More than 40 percent of the water pipes from open sources have no treatment installations at all. There is no centralized water supply at all in six cities and 419 villages of Russia. Water is supplied according to schedules in more than 100 cities, because the pumping stations do not have sufficient capacities.

The condition of the water supply system is a sad topic in itself. Of the 650,000 kilometers of municipal pipes, 300,000 are in disrepair. In Russia, 75,000 "waterpipe" accidents and breaks are reported annually. But worst of all is the fact that, in many cities, rusty and rotted pipes have become sources of pollution of potable water that has already been treated.

According to the data of the Sanepidnadzor [State Committee for Sanitary and Epidemiological Oversight], more than half the Russian people are compelled to drink water that does not meet our hygienic standards in many respects. But these figures do not reflect the entire tragedy of the situation. The fact of the matter is that our specialists do not really know what we are drinking, there is not a single arbitration laboratory in Russia that analyzes water on a par with world standards. Since 1992, The World Health Organization (WHO) has recommended checking potable water for about 100 parameters, which have a direct effect on public health. In our GOST [State Standard], the "Potable Water" item lists only 28. And you can bet that even if the other 72 indicators were tested, the percentage of water fit for consumption would be very low.

The problem of supply of potable water in Russia can be solved only on a government level. I am referring to control of industrial waste that pollutes reservoirs, as well as monitoring use (unthinkable amounts of expensive potable water are still being used for industrial purposes), modernization of water supply stations and treatment installations. But all this constitutes global, national concerns.

I would very much like to know whether I can get a glass of pure water, if not for myself, at least for my child.

It turns out that such possibilities are now emerging. Some of them, it is true, are realistic mainly for a chosen few: very recently, for example, I learned that in Moscow alone there are about 30 private drilling firms that are ready to provide you with your own artesian well for a rather hefty sum. Oh well, let us be happy for the millionaires!

There is a more accessible solution: each of us, even now, can install in our own home one of the filters that have appeared recently on the market.

Finally, there is yet another means of providing pure drinking water to an individual family. This way has long since been followed in many countries (where, incidentally, there are also serious problems with supplying water to the public) and it is called bottled drinking water. Imported bottles of this foodstuff that is new to us have already appeared in Moscow. There is no domestic production as yet. Although, in the former Soviet Union, in Turkmenia, the first plant for such water was built in 1991. It is still operating with success. Petr Dmitriyevich Yushchenko supervised construction of that plant, and he is now the general director of the AQUA [AKVA] commercial production company.

"Let us !ook truth in the eyes," states P. Yushchenko. The existing technology involves processing potable water from naturally occurring water. But the latter has not existed in surface waters for a long time. Not a single technology, even the most modern, is designed for sewage, nitrates, nitrites, phenols, dioxins, mercury, lead.... And if the thousands of pollutants were really removed from water, it would be incredibly expensive. In Russia, only seven percent of the daily water consumption from the water system is used to prepare food, while the rest is used for household needs and simply flows down the drain, although billions of rubles are spent to treat it.

AQUA has proposed a program "Pure Water for Russia" to the RF government. It provides for construction of seven plants to produce ecologically pure drinking and mineral water in disposable plastic bottles. Artesian wells reliably protected against pollution are to be its sources. The program has been approved by the Russian government and all concerned agencies, and it was recognized as a federal one. At present, the question of issuing credit to build a Moscow clean water plant with a capability of 100 million bottles per year is being

examined. Another such plant will be erected in Nizhniy Novgorod. It is planned to build similar plants in St. Petersburg, Yekaterinburg, Belgorod and other cities. Of course, the main problem is funding for the program. After all, in essence we are dealing with creating a sector of industry that is new to Russia.

Of course the "Pure Water for Russia" program will not solve all of our problems in one fell swoop. If only because, according to estimates of specialists, approximately six million bottles per year are needed for our country, which means that we need to build 60 plants, instead of seven. And the cherished bottles must be affordable to all, and not only for rich people. So that it is obviously too soon to "cancel" the concern about piped water. Bottling the water could become the salvation for people when there are ecological accidents or natural disasters, insurance in the event of multiple damage to water pipes.

This program is not a panacea, but a realistic step toward strengthening our public treasure—health.

Twelve Percent of Russian Schoolchildren Deemed Healthy

94WE0253F NEZAVISIMAYA GAZETA in Russian 26 Mar 94 p 6

[Article by Larisa Artemova: "Only Twelve Percent of Schoolchildren in Russia Can Be Deemed Healthy. The DAR Center Will Take Care of 'Deviant Children'"]

[Text]

A Sore Point

A creative seminar on "Rehabilitation of children with deviant behavior" was held in Moscow at the research and methodological center of DAR (Diagnostics Adjustment Development) in Moscow. Most children that are considered healthy today can be put in this category.

According to statistics, in Russia as a whole 87.4 percent of the school children are not in the first health group, which means they are not absolutely healthy. Only 6.4 percent of first-graders were highly resistant to physical loads, while 51.3 percent could not cope with even average ones. We are particularly alarmed at the figures indicating the condition of the nervous system, emotional and mental development of children, and their relations with the outside world. A total of 28 percent of children in the lower grades experience problems with adjustment to their environment, 22 percent have a tendency toward depression, and 23 percent are in the risk group for aggressiveness.

There are a number of ministries—of education, social services, internal affairs, public health—presently dealing with so-called deviant children. There is no unified concept in the country of how to work with "nonstandard" adolescents. There is an acute problem of independent expert opinion, since schools are interested

chalking off their failures to diverse deviations in failing and disobedient children. Funding problems have not been resolved. Thus, creation of remedial instruction is encouraged with financial incentives, whereas transfer of "remedied" children from such classes to ordinary ones is not. Children in whom some deviations or other have been found can expect the most varied fates, ranging from support groups where they are equally involved in the life of the school regardless of their educational achievements to "straightening out classes," taught by tired teachers in their last year before retirement, while the child has to become reconciled with the reduction of the curriculum with extension of the period of education.

In order to determine whether behavioral deviations are due to serious organic disturbances, genetic pathology, or whether we are dealing with borderline mental deviations, social maladjustment, pedagogic neglect, not only professionalism of teachers and physicians, but also modern diagnostic equipment and computers are needed. Today, there are already quite a few centers, schools and orphanages in Russia for children whose development deviates from the average. But the experience gained by all these institutions needs to be summed up, and the DAR center is working on this task. In March, the boarding school opened at the DAR center in Moscow took in its first children. Pedagogically, emphasis is laid there on seeing that the children do not get behind the school curriculum and can return without any problems to ordinary schools. Children will spend several months at the boarding school, receiving all necessary psychological, pedagogic and medical aid, ranging from primary diagnosis to rehabilitation complexes.

Medical treatment includes phytotherapy, therapeutic essential oil inhalations, and even elementary dental care which is needed by almost 90 percent of schoolchildren. The founders of this new educational and medical institution promise that psychologists working at the center will do everything possible to return children to society not only with a new attitude themselves and the world, but also with specific recommendations on how they can provide the most comfortable environment for themselves. On the whole, however, as noted by many specialists in working with difficult children, the new center can serve well as a model for similar institutions in all of Russia.

Japan Donates Medical Equipment to Moscow Hospitals

94WE0253D Moscow KURANTY in Russian 22 Mar 94 p 2

[Text] The Japanese government decided to furnish free aid to Moscow amounting to 260 million yen. The aid is furnished to three Moscow hospitals that purchase diagnostic equipment—computerized scanning tomographs, endoscopic equipment, optical microscopes, ultrasound apparatus. Incubators for neonates will also be furnished.

The first shipment of medical equipment was delivered to the Morozov Pediatric Clinical Hospital, Tushinskiy pediatric hospital and municipal hospital No 61. In its choice, the Japanese government emphasized support for pediatric medicine. Yu. Luzhkov, mayor of Moscow, K. Watanabe, Japanese ambassador to Russia, and Ts. Hata, foreign affairs minister of the Land of the Rising Sun came to the Morozov clinic to attend delivery of the equipment.

Radioactive Hazard Found in Moscow Hospital

94WE0253A Moscow TRUD in Russian 13 Apr 94 p 4

[Article by Oleg Zolotov: "Radioactive Source Found in Hospital"]

[Text] A source of radioactive contamination was again discovered in the capital. As reported to a TRUD correspondent by Tatyana Zakharova, chief of the Moskompriroda press service, medical center No 33 was fined half a million rubles for failure to carry out orders pertaining to cultivation of a contaminated area. On the grounds of this medical complex (not far from Prospekt Mira) there is a one-story building which had housed a radon laboratory in the past. The products of radium fission had been used to treat patients. Because of inadequate supervision of production, large amounts of hazardous waste had accumulated there. As a result radiation level reached 101 milliroentgen per hour. (The standard for Moscow is 14 mR/hour).

"There is no particular hazard to people employed there," stated Oleg Varenikov, laboratory head at the Moscow sanitary and epidemiological station. "The recorded radiation levels are comparable to those inherent in some types of granite. However, the situation will change for the worse unless the waste is removed within the immediate future."

Diphtheria Incidence, Program Noted

94WE0254C Moscow RABOCHAYA TRIBUNA in Russian 16 Apr 94 p 3

[Article by Tatyana Kolysko under the rubric "Important News!": Diphtheria Is Grabbing Us by the Throat. And Now People Remember Inoculations"; first paragraph is RABOCHAYA TRIBUNA introduction]

[Text] The high incidence of diphtheria that is being talked about for three years already suggests that perhaps it is on the decline. Epidemics come and go, so that it is now time for this infection to recede, particularly since this is not 1918, and all of medicine has been raised to its feet.

"Yes, the pathologists of our hospital alone examine two diphtheria-ridden cadavers almost daily," states Nina Vasilyevna Astafyeva, physician at the Second Infectious Hospital. "These deaths occurred here, in the hospital, on the street or in the home. They are not necessarily the homeless and drunks, although this category is more

susceptible to infection. But after all, they walk among us, use the same transportation and public fountains. But the victims who are found dead a home are often single, use self-treatment methods not knowing what their illness is."

One must know the first signs of diphtheria: sore throat and fever when the pharynx is stricken, hoarseness and asphyxia if the larynx is involved. One should not panic right away if such symptoms appear, they could also be due to other causes. One should simply call a physician right away.

This disease is terrible for its complications: it affects the heart (and then there is no hope), the nervous system (paralysis), etc. There are cases of diphtheria involving the eyes, skin, and nose.

"We recently discharged a patient. Such a nice person, and all of us in the department liked him," continued Nina Vasilyevna. She looked fondly at a photograph and handed it to me. I could not help shuddering: a deformed face, thick swollen eyelids covered with a scab, just like I imagined a leper would look. As a rule, this disease leads to blindness."

Nina Vasilyevna noticed by reaction and reassured me that the patient recovered.

Unfortunately, by far not all patients recover. A 49-year old engineer, Aleksey X, lies in the resuscitation department. He has a serious cardiac complication. The physicians have no hope that Aleksey will survive.

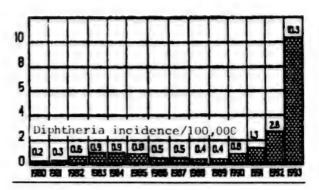
I felt rather uncomfortable in the big clean halls of the Second Infectious Hospital and, when I confessed to Nina Vasilyevna that I was not inoculated, she was amazed.

"I do not understand our people. In the West, people spend their money for inoculations. And in our country, they do not want them for free. What else has to happen for people to realize that this is necessary? In Finland, if there are five cases of the disease, it is virtually a national tragedy and panic. But our people cannot be reached with anything until the disease grabs them literally by the throat...."

The doctor shows me a photo: a patient has an incision in his throat, which is the only way he can be saved from asphyxia, a frequent cause of death.

But for the time being, diphtheria is roving freely around the country. Of the 89 territories of Russia, 28 are in extremely bad condition. They are led by Moscow, St. Petersburg, Maritime Kray, Tyumen.... In 1993, there were 15.229 cases, 4503 of them children. There were 468 deaths. In only two months of this year, 4000 cases were recorded with 100 deaths....

In view of the existing situation, there has been a headquarters for control of diphtheria in operation since October of last year, which is headed by A. Tsaregorodtsev, deputy minister of health [Minzdravprom—



ministry of health industry?]. On the basis of the work done by the headquarters, relevant government decrees have been issued and allocations granted to enterprises producing antidiphtheria agents.

Incidence of Tuberculosis Rises Abruptly in Yaroslavl Oblast

94WE0254B Moscow IZVESTIYA in Russian 30 Mar 94 p 4

[Article by Mikhail Ovcharov: "Outbreak of Tuberculosis in Yaroslav! Oblast"; dateline Yaroslav!]

[Text] The extraordinary epidemic control commission formed by Yaroslavl governor Anatoliy Lisitsyn admitted at its first meeting that an extremely bad situation has developed in this oblast with regard to incidence of tuberculosis.

Last year, there were almost 23 percent more people stricken with this dangerous disease, and this constitutes 32 people per 100,000 population. If we consider that the public is quite distrustful of fluorographic examinations at the present time, this is merely the tip of the iceberg: the real picture is considerably worse. Its incidence among children and adolescence is particularly alarming, since it is almost twice the indicator for Russia as a whole. And the infectivity of children up to 14 years of age exceeds the WHO indictor by 25-40 times.

In the last year, there has been a dramatic rise, by more than 40 percent, in deaths due to tuberculosis. For this sad indicator, Yaroslavl Oblast has advanced to first place in infectious pathology. And it is in fifth-sixth place among all causes of death, after cardiovascular diseases, trauma and cancer. Last year, three homeless people died of tuberculosis right on the street. But the diagnosis was only made at autopsy. Who knows how many such infected transients are walking among us, die and infect others....

It must be admitted that the situation is depressing. Muza Kozlova, chief phthisiatrist of the oblast states, "All this can be explained. The buildings that house polyclinics, hospitals and specialized sanatoriums were erected a hundred years ago and today they are virtually

demolished, but new ones are not being built at all. As for treatment of children, the number of beds in pediatric sanatoriums has dropped to two-thirds and in specialized preschool institutions to one-third [the former levels]. We are working with obsolete equipment, without necessary drugs. There are no places or resources to treat the sick. We are appealing wherever we can, but receive the same answer: alas, there are no funds. The forecast for this year is even more disquieting: most likely the number of tuberculosis cases will double. If the necessary steps are not taken now, we can expect a disaster."

Mercury-Based Preparation Said Effective Against Cancers

PM2706131794 Moscow IZVESTIYA in Russian 28 Jun 94 p 5

[Tatyana Khudyakova report: "Mercury Against Cancer and AIDS"]

[Text] Scientists in many countries around the world are engaged in the search for an effective preparation for the treatment of oncological illnesses and the "2Oth century plague" of AIDS. Sufferers greet all news of the appearance of a new medicine with hope, but then suddenly....

"Viturid," an anticancer preparation developed by analytical chemist Tamara Vorobyeva, has not yet obtained legal "entry" to the pharmacies since no conclusion has yet been received from the pharmaceutical committee. However, as long ago as 27 July 1993 the Russian Scientific Research Institute of State Patent Appraisal issued the inventor of the new preparation and methods of treating a number of oncological ailments with four patents, adding a further patent a little later.

The preparation is based on mercury salts. Mercury has always been considered an extremely toxic substance. However, after 20 years of research Vorobyeva has managed to discover the necessary doses and pharmaceutical form—an aqueous solution has been found to be nontoxic. The preparation "works" in the human organism for only six hours and is then expelled. Its effects are apparent in transforming cancer cells into normal cells.

According to the inventor, clinical trials of "Viturid" began many years ago in Ukraine and confirmed the preparation's considerable efficacy. The scientific and theoretical evidence has been confirmed by the experimental research of several scientific centers of the Russian Academy of Medical Sciences and Moscow's Sechenov Academy of Medicine.

Today the production of small consignments of "Viturid," and also a clinic where patients are received and treatment carried out, are located in Petrozavodsk. The cost of a course of treatment is 350,000 rubles.

"I am criticized for charging for the treatment of cancer patients," Tamara Vasilyevna says. "But I have no option. I have to conduct all my research on my own money. All these long 20 years the state has allocated practically no money. On the other hand scientists in the United States are interested and have offered me a clinic and conditions to continue my research over there. I have set up only a development firm over there, so that all the production rights for 'Viturid' remain in Russia."

...For the terminally ill, any information of such a kind is almost like a medicine. But there is nothing more terrible than a false hope of recovery. I deliberately do not cite figures for the number of patients cured, although Tamara Vasilyeva did give them. I would not risk calling the new preparation the discovery of the century, as some of my colleagues on other publications have done—that is too heavy a burden of moral responsibility toward sick people. But nor does my conscience permit me to stay silent.

Duma Seeking 'Sensible Balance' in New AIDS Law

PM2306154594 Moscow ROSSIYSKAYA GAZETA in Russian 22 Jun 94 First Edition p 2

[Galina Yudkevich report: "Society's Interests and the Patient's Rights. Law on AIDS Should Combine Them"]

[Text] The law "On Preventing the Spread of the HIV Virus in the Russian Federation" is currently being drawn up by the State Duma Committee for Health Care and will soon be submitted for debate.

Driven crazy by political and economic cataclysms, we seem to have forgotten about problems which seriously concern the rest of the world. There is a real AIDS epidemic raging around our country's borders. There are states where up to 80 (!) percent of the population is infected with the virus. In Russia, according to official statistics, 746 people are infected in 53 out of 89 territories. According to some figures, the number has reached 1,000. In addition, we have recorded 438 infected foreigners. In terms of the number of people infected and ill, the situation in Russia today corresponds to the indicators in the United States in the first half of the eighties.

The simplest way to combat AIDS is to make laws extremely harsh against those infected. In Cuba, for instance, they are simply sent to special "sanatoriums," which are more reminiscent of jails. But AIDS is not anyone's fault; it is a tragedy. Not to mention the fact that this form of fighting an illness is intolerable from the human rights standpoint, it is ineffective—it is impossible even to identify, let alone isolate all those who are infected.

There is another way: to create in society, if we can put it this way, a "presumption of infection." Fear of infection leads to overcaution, and the problem seemingly resolves itself. But making a huge number of people excessively frightened instead of sensibly educating them

inevitably leads to AIDS-phobia. Those with the misfortune to get infected become outcasts.

The truth, as always, lies somewhere in between. Finding a sensible balance between the interests of society, which wishes to safeguard itself against this deadly danger, and the patient, who has his own rights—that is the task the designers of the new law are facing.

Compared with the law adopted in 1990 "On Preventive Treatment for AIDS," the new draft law is far closer to today's international-law standards. Without going into details, we can say that it places the main emphasis on enshrining the state's responsibilities as regards the treatment and social support of those infected and on increasing the responsibility of medical staff for dealing with the infection.

The most diverse views about the draft law were expressed by participants in a recent press conference—representatives of the WHO and medical and international public organizations dealing with the problems of AIDS. One extreme view was that an AIDS law is not needed at all, since the disease is one of thousands of dangerous diseases known to medicine. There is no need to adopt a special law on every one! But everything here seems clear—of all the known diseases there is none that can be compared to AIDS in terms of its deadly danger and the real threat it poses to all mankind.

The draft law's lack of an article relating to sanctions for the disclosure of medical secrets was noted. Such an article is indeed needed, given that, thanks to the idea of general health provision for the population, doctors often intervene actively in patients' lives. In small towns, where everyone knows everything about everyone else, a note on your door to attend a clinic for an HIV examination can have the most dramatic consequences.

Serious comments about how certain articles of the draft law will be carried out were made by a press conference participant to whom the future law will directly relate—he has been infected since 1988. His pension is currently 43,000 rubles [R]. But a two-week course of treatment (in other words, the possibility of prolonging a patient's life by two weeks) costs more than R900,000.

Incidentally, this law is one of the first to be drawn up by the State Duma.

Typhoid Outbreak in Northern Caucasus Region LD1806114494 Moscow ITAR-TASS in English 1057 GMT 18 Jun 94

[Article by ITAR-TASS correspondent Nikolay Styazhkin]

[Text] Cherkessk, northern Caucasus June 18 TASS—An outbreak of typhoid fever has been registered in the Ust-Dzhegut and Prikubanskiy regions of the Republic of Karachayevo-Cherkessiya. Some 20 people have already been hospitalised with that grave infectious

disease, a spokesman for the republican Ministry of Public Health told ITAR-TASS. A check-up made it possible to establish that water, used for making food and for household purposes, was the cause of the typhoid outbreak.

Typhoid was first registered in the city of Ust-Dzhegut five years ago as a result of the fact that the water fed to residential areas did not meet standard requirements. Comprehensive measures for the disinfection and repair of the local water-supply network, sewage networks and rain conduits were worked out. However, a major part of the plan was never fulfilled, Yevgeniy Danilin, deputy head physician of the republican Centre of Sanitation Inspection, said. Speaking about factors, which posed special danger to the health situation, he specially mentioned the fact that 52 breakages in the water-supply pipes had been registered in Ust-Dzhegut since the beginning of the year, as a result of which various impurities often got into the drinking water.

Hepatitis cases are being registered in Karachayevo-Cherkessiya more frequently than before because of a shortage of funds allocated for the maintenance of watersupply and sewage networks, as well as purification facilities.

KAZAKHSTAN

Twenty-Six Cases of HIV Infection Registered LD0206132794 Moscow ITAR-TASS in English 1135 GMT 2 Jun 94

[Article by ITAR-TASS correspondent Fedor Ignatov]

[Text] Alma-ata [Almaty] June 2 TASS—Kazakhstan health authorities have registered 26 cases of HIV infections in 11 different regions. Ten of the HIV-stricken patients are foreigners, and the other 16 are local residents. Four of them have come down with the AIDS syndrome, including two children, according to the international seminar on AIDS and drug addiction prevention, which was recently held in Chimkent.

The gathering was attended by medical workers and representatives of public organisations from Kazakhstan, Kirgizia, Tajikistan, and Turkmenistan. The central Asian region in particular is suffering from a rapid growth in drug use and the organised crime that accompanies it. Drug users are more than usual subject to contracting the HIV.

LATVIA

Four Leptospirosis Deaths Reported in Riga This Year

WS0606140194 Tallinn BNS in English 1143 GMT 6 Jun 94

[Text] Riga, Jun 04, BNS—Riga physicians have registered 12 cases of leptospirosis, four of which had fatal

consequences, in the first five months of this year, Yuri Perevoschikov of the National Environmental Health Center told reporters Friday.

In the recent three years, 65 cases of leptospire infection, which is usually spread by animals, especially rats, were registered in the Latvian capital, Perevoschikov said.

Perevoschikov drew a link between the spread of the disease and the economic instability and low living standards of population.

Physicians claim that Latvia needs a national program to control diseases spread by rodents.

MOLDOVA

Cholera Case Reported in Moldova; First in 15 Years

LD2506141794 Moscow ITAR-TASS World Service in Russian 1327 GMT 25 Jun 94

[Report by ITAR-TASS correspondent Valeriy Demidetskiy]

[Text] Kishinev, 25 Jun—An outbreak of cholera has been recorded in Moldavia [Moldova] for the first time in the past 15 years. The victim is an 18-month old child from the village of Durleshty, a suburb of Kishinev. Medical personnel have adopted the necessary measures to localize the source of the outbreak. The entire family was rushed to the hospital. People who have been in contact with the child over the past two weeks are under observation. An ITAR-TASS correspondent was told at Kishinev's hospital for infectious diseases that the illness had occurred in a mild form and that those in the hospital would soon be discharged.

It has been established that the cholera vibrio is present in the local lake.

The last outbreak of cholera was recorded in Kishinev in 1979-80. Several dozen people fell ill at that time, and some died.

TURKMENISTAN

AIDS Center Chief Reports on Turkmenistan AIDS Program

94WE0255A Ashgabat TURKMENSKAYA ISKRA in Russian 1 Dec 93 p 3

[Article by T. Bagiyeva, chief physician at Turkmen Center for AIDS Prevention and Control: "Slogan: 'Time for Action'"; first paragraph is TURKMEN-SKAYA ISKRA introduction]

[Text] At the 42d session of the World Health Assembly considerable interest was displayed in holding a World AIDS Control Day as an annual demonstration of global measures for the prevention of AIDS. This year, the World Health Organization proposes to hold World

AIDS Control Day on 1 December under the slogan of "Time for action." This is a united appeal to all countries of the world to act together and in a coordinated manner.

The need for urgent action is obvious: the AIDS pandemic is indeed global. Human immunodeficiency virus, or AIDS, spreads as before faster than action taken to hold it back. At the present time, 5000 people are infected daily. Since this epidemic appeared, 14 million men, women and children have been infected with HIV, and more than 2.5 million have contracted AIDS. It is expected that both these figures will increase by several times by the year 2000.

In view of the danger of the spread of this disease the government and Health Ministry of Turkmenistan devote much attention to the problem of preventing AIDS. It has been elevated to the rank of state policy, which was reflected in the Turkmenistan law "On Prevention of AIDS," enacted in 1991.

In 1992, the Turkmen Cabinet of Ministers approved the "Comprehensive AIDS control program for 1992-2005." The main directions of this program are to protect the territory of Turkmenistan against penetration and spread of AIDS, material and technical support of the AIDS prevention service, moral upbringing and education of the public, campaign for a healthy life style, resolution of legal issues and social protection of HIVinfected people and AIDS victims, expansion of international collaboration. Execution of this program is monitored by the Turkmen Cabinet of Ministers and Ministry of Health. It must be stated that this is a government program and it is complex, involving many institutions and agencies. The Health Ministry allocates funds to outfit AIDS detection laboratories with the best equipment and test systems; it provides therapeutic and preventive care institutions with disposable syringes, which lowers the risk of nosocomial infection. We are working in good contact with the Ministry of Education, National State Television Company, press agencies and Turkmen National Society of the Red Crescent.

At present, in our country, there are the Turkmen and four urban ["velayatskiye"?] centers for the prevention and control of AIDS, 48 diagnostic laboratories, and offices for anonymous screening of the public. More than 500,000 people are tested annually. Anyone who so wishes has the right to be tested anonymously for HIV infection. Anonymity is guaranteed. Blood donors, pregnant women, drug addicts and people with venereal diseases are subject to mandatory comprehensive AIDS testing annually.

The Turkmen center is the base institution for training personnel. As of now, more than 2000 health care workers have been trained. We are carrying out this work together with the Turkmen "Order of Friendship of Nations" State Medical Institute and medical schools. Contact has been set up with the World Health Organization which furnishes to us methodological materials

and provides humanitarian aid. Our specialists have participated in international conferences, meetings and seminars.

For World AIDS Control Day, health care workers everywhere will organize lectures with exhibition of videofilms, talks, round table discussions, competitions for visual aids. However, AIDS control is not solely the concern of physicians. All concerned ministries, agencies, and the public are needed to campaign for a healthy life style.

We warmly approve and support the "Ten years of welfare" program announced by our president, Saparmurat Turkmenbashi, and shall respond to it with honest and conscientious work. After all, the health of the people is the wealth of the nation.

UKRAINE

National AIDS Committee Warns of HIV Threat LD0306173394 Moscow ITAR-TASS in English 1620 GMT 3 Jun 94

[By ITAR-TASS correspondent Galina Nekrasova]

[Text] Lvov June 3 TASS—Ukraine does not have the necessary diagnostical equipment to check donors' blood for HIV and therefore its citizens are in danger of unwillingly contracting the deadly virus, the Ukrainian

national committee for the battle against AIDS announced through the mass media.

The situation is threatening, considering the growing number of people in need of blood transfusions, the committee said. Blood donated at blood-transfusion sites is not checked for the virus which causes AIDS. The assignations committee of the Ukrainian Cabinet of Ministers has not approved any money for the purchase of the necessary testing machinery. In this connection, the AIDS committee has publicly denied any responsibility for the safety of donors' blood and, therefore, for the safety of blood transfusion patients.

At the same time, the AIDS situation in the country is worsening. There are about 150 registered cases of people who are sick with or have contracted the HIV. The highest numbers belong to Odessa region with 43 cases, Kiev with 18, and Donetsk region with nine. But Deputy Chairman of the committee Valeriy Ivasyuk thinks that the number of infections is significantly more than those registered.

Considering the irresponsibly low financing given to the budget of the anti-AIDS programme, Ivasyuk thinks that AIDS in Ukraine will become a major economic and political factor. The disease will exhaust the budget so much that it will threaten Ukraine's very existence as a state. Now, he said, eight million dollars are needed to buy the necessary diagnostical equipment of Westernmake. The government, however, is still silent on this point, even in direct defiance of the Ukrainian president's instructions, the committee member declared.

REGIONAL AFFAIRS

EC Approves 10 New AIDS-Related Research Projects

BR3105074994 Luxembourg News Online Database in English 6 May 94

[Document entitled: "Commission Supports 10 New AIDS-Related Projects"]

[Text] Mr Padraig Flynn, [EC] Commissioner for Social Affairs, has announced that ten AIDS-related projects have been selected following a competitive call for tenders and that Commission funding for these projects will amount to about ECU 1.3 million during 1994-95. These projects will complement the educational and preventive activities already being carried out under the "Europe against AIDS" programme and will strengthen the European Community's efforts to combat the disease.

The ten projects which have been selected for funding fall into the following categories:

- Assessing the knowledge, attitudes and behaviour of the public and target groups: Two projects have been selected in this area. The London School of Hygiene and Tropical Medicine (UK) will carry out a survey of existing data in relation to the general public in the EU [European Union]. This will be complemented by a survey of data on key target groups, such as drug abusers and homosexual men, to be undertaken by the University of Limerick (Ireland).
- Increasing the awareness of the general public and certain target groups: Two projects have been selected in this area. The Universities of England Consortium for International Activities (UNECIA) will undertake a review of the information campaigns already undertaken in the Member States and the evidence of their effectiveness. This will lead on to an examination of the feasibility of Community campaigns such as the development of a European Code on AIDS prevention. The Reseau National de Sante Publique [National Public Health Network] in France, in collaboration with Monde Medicale in Belgium, will undertake an innovative pilot project to circulate AIDS information electronically to both general practitioners and pharmacists. This may serve to improve the provision of information and advice to patients.
- Health Education for young people: Health Promotion Wales (UK), in collaboration with the Danish Research Centre for Environmental and Health Education, will establish a network of organizations in the Member States to exchange experience of AIDS education in schools and to draw up proposals on good practice. Also in this area the Instituto Superiore di Santa (Italy) will organize a major international conference in October 1995 in Rome to discuss AIDS education in schools.

- Social support and counselling: Telephone helplines can make a valuable contribution in providing advice and assistance to those worried about HIV and AIDS. Health Promotion Wales (UK), in collaboration with Bielefeld University (Germany) will carry out a survey of Community AIDS helplines to assess their effectiveness and how they publicise the service provided and deal with safeguarding confidentiality. SIDA Info Service (France) will arrange seminars involving AIDS helplines in order to exchange experience and develop ideas for improving and extending services.
- Resource aspects. The University of Nottingham, in collaboration with the Danish Hospital Institute, will consider the implications of the AIDS epidemic for Member States in terms of financial and human resources. The Universities of England Consortium for International Activities (UNECIA) will undertake a review of the training offered to health professionals in the EU and make suggestions on how it can be improved.

A sum of ECU 9 million has been provided in the 1994 budget to finance activities under the "Europe against AIDS" programme and a similar amount is being proposed for next year in the 1995 draft budget.

Document supplier: European Commission, Service du Porte-Parole

Document reference number: Press release IP/94/356 of 2.5.1994.

Program duration 1994-05-06 to 1994-11-06.

Current status: program implementation.

GREECE

AIDS Cases Rise to 916 Since 1984; 354 Already Dead

NC3105035694 Athens Elliniki Radhiofonia Radio Network in Greek 1700 GMT 30 May 94

[Excerpt] Twenty five new AIDS cases were found in Greece in the last three months, which raises the total number since 1984 to 916. There are an estimated 13,000 to 15,000 carriers of the AIDS virus. Our correspondent has the following report:

Unidentified Correspondent: Twenty-five new AIDS cases were discovered in Greece during the last three months, raising the total number of cases since 1984 to 916. At the same time, the carriers of the AIDS virus are estimated to number from 13,000 to 15,000. Of the 916 cases, the 801 are men, 55 women, and 20 children. Already 354 of those infected with the virus have died.

Health Minister Dhimitrios Kremastinos, who held a news conference in the framework of an AIDS seminar organized by the Center for the Control for Special Infections at PARTET [not further identified] Institute, stressed that Greece still has the fewest cases in Europe. However, this does not justify relaxation, since the

disease is progressing in other countries and preventive measures should be intensified. [passage omitted]

NORWAY

'Abnormally Large' Number of Strep Cases Reported

94P20886A Oslo AFTENPOSTEN in Norwegian 3 Jun 94 p 3

[Excerpts] The National Health Registry has recorded 123 cases of the deadly streptococcus A to date. Last week an additional five cases were reported, but these cases could have started as early as April.

"We should not declare an end to the threat," Dr. Bjorn Lversen of the National Health Registry said. He stressed that the Health Registry does not have a complete overview of how many have been taken ill, and that five new cases do not mean that five persons were stricken last week. [passage omitted]

"We continue to have an abnormally large number of these infections, so there is every reason to be alert to the danger. People in general who do not feel particularly ill need not worry. You have to feel very ill before it might be a case of dangerous streptococci," Dr. Iversen told the Norwegian News Agency, NTB.

Streptococcus Causes 11 Deaths 94P20920A

[Editorial Report] Stockholm SVENSKA DAGBLADET on 28 May 94 carries on page 9 an article by Johan Selander reporting that from January to March, 85 cases of the streptococcus A bacterium, which has caused several deaths in Great Britain, have been reported in Sweden. Eleven of these cases have resulted in death, four from infections in the muscles similar to those that killed the victims in Great Britain. The first serious streptococcus epidemic was in the winter of 1988-89, when the bacterium came from Norway, and 30 people died. Doctors believe that those that had the disease then are immune to it now.

UNITED KINGDOM

More Details on Gloucester Virus Deaths Told 94WE0291A London THE SUNDAY TELEGRAPH in English 22 May 94 p 3

[Article by Robert Matthews and Victoria Macdonald: "Bacteria Clue to Virus That Can Eat Flesh"]

[Text] Health experts investigating the outbreak of a deadly infection that eats human flesh have turned their attention to a virus that preys on bacteria.

Last night a seventh victim of the disease, which has claimed three lives in the past four months, was in a critical condition in the intensive care unit at Gloucestershire Royal Hospital.

All cases of the usually rare condition, known as necrotising fasciitis, have come from a 25-mile radius in the Gloucestershire area.

Like something out of science fiction, the gangrene-like infection spreads rapidly, eating fat and tissue, and can kill in 24 hours. It is associated with the common streptococcus bacterium which causes sore throats and is carried by 10 per cent of the population.

However, the sudden rise in the number of cases suggests that something has happened to this usually harmless bacterium, turning it into a potential killer.

Experts are now looking at the bacteriophage virus, which preys on bacteria, clamping on to their outer walls and squirting in its own genetic instructions, creating potentially lethal new strains of bug.

"Bacteriophages are one of the factors that can change streptococcus, making it more virulent," said Dr Richard Mayon-White, an expert on viral and bacterial epidemics at Oxfordshire regional health authority.

"When one sees an unusual cluster of necrotising fasciitis, there may be a bacteriophage behind it."

Dr Mayon-White said that his health authority had been warned to look out for any signs of the infection spreading from neighbouring Gloucestershire, and is treating the alert seriously: "When it was just three cases, it was a curiosity—seven cases is a matter of concern."

What makes the infection so worrying is the speed with which it affects the body. Normally antibiotics can be relied on to knock out a bacterial infection. In necrotising fasciitis, however, the tissue is attacked by toxins so rapidly that medicines can do little to help.

"If the bacteria get a grip before antibiotics are given, then they are much more difficult to treat," said Dr Mayon-White. "As the main clinical problem is damage to subcutaneous tissue, a surgical procedure to clear out the necrosis is also necessary."

Last night Dr David Hunt, consultant in public health medicine at Gloucestershire regional health authority, admitted he was still going through the literature to see if there had ever been similar outbreaks.

"It is a haphazard illness which occurs in an unpredictable fashion," he said. "We must also remember that it is rare."

Dr Hunt said the symptoms to look for are a sudden reddening, blistering and discolouration of the skin.

Death Toll Rises From Necrotising Fasciitis

LD2505103894 London PRESS ASSOCIATION in English 1009 GMT 25 May 94

[Article by Association News correspondents Rebecca Maer, Sian Clare, and Joe Quinn]

[Excerpt] The toll of victims of the terrifying bug which eats human flesh could rise to nine as two new suspected cases emerged today. Health experts were checking whether two people who died as far apart as Scotland and Devon had succumbed to the fast-spreading disease which is already known to have killed seven people.

Pamela Cunningham, 25, from West Lothian, died as her husband Peter kept vigil by her bedside 12 days after being admitted to hospital in February complaining about a spot on her thigh. Neither the Lothian health board nor the hospital, St Johns in Livingston, would comment on her case today.

Health experts are also trying to establish whether an elderly patient in Devon became a victim of the disease a few weeks ago. The director of public health for the Exeter and North Devon health authority area, Dr. Michael Owen, said today it had not yet been confirmed that the patient, who has not been named, was suffering from necrotising fasciitis, which is caused by streptococcal bacteria being turned killers after attack by a virus.

The health authority has provided GPs with the latest information on the infection, and which people are more likely to be at risk. [passage omitted]

Increase in Brain Tumor Research Needed

94WE0310A London THE DAILY TELEGRAPH in English 9 Jun 94 p 4

[Article by David Fletcher, Health Services correspondent: "Plea for Swift Action Over Increase in Brain Tumours"]

[Text] Brain tumours have increased by a third in the past 40 years and research into the cause is urgently needed, says a report today.

The British Brain and Spine Foundation complains that research into the tumours—which affect 5,000 people a year—has been negligible in comparison with other cancers such as leukaemia, breast cancer and colon cancer.

Mr Peter Hamlyn, consultant neurosurgeon at St Bartholomew's Hospital, London, and secretary of the foundation, said possible causes needing investigation included food additives, radiation, electrical power lines and traffic fumes.

He said: "We simply do not know what is causing the increase but we do need to investigate all the possible environmental factors to see whether there could be a connection."

However, many lifestyle factors such as cigarette smoking, alcohol and diet were not thought to have any effect on the development of brain tumours.

Research was also needed into the biology of brain tumours because they behaved differently from other forms of cancer.

He said they did not spread to other parts of the body like most other forms of cancer and tended to affect children and young people.

Mr Hamlyn, speaking at the prelude of next week's Brain and Spine week, said that big improvements were being made in treating brain tumours in children.

Children's tumours were more responsive to treatment because they were "primitive" but he said there was an urgent need to improve the success rate of treatment for adults.

Only 350 of Britain's 16,000 hospital doctors were neuro-specialists and only 40 hospitals, out of 760, had neurological departments compared with double that level of provision in most other developed countries.

Mr Hamlyn said: "We need to raise awareness of brain tumours, both among the public and front-line medical staff, so that they are diagnosed and treated earlier when there is a greater chance of successful treatment."

BULK RATE U.S. POSTAGE PAID PERMIT NO. 352 MERRIFIELD, VA.

This is a U.S. Government publication. Its contents in no way represent the policies, views, or attitudes of the U.S. Government. Users of this publication may cite FBIS or JPRS provided they do so in a manner clearly identifying them as the secondary source.

Foreign Broadcast Information Service (FBIS) and Joint Publications Research Service (JPRS) publications contain political, military, economic, environmental, and sociological news, commentary, and other information, as well as scientific and technical data and reports. All information has been obtained from foreign radio and television broadcasts, news agency transmissions, newspapers, books, and periodicals. Items generally are processed from the first or best available sources. It should not be inferred that they have been disseminated only in the medium, in the language, or to the area indicated. Items from foreign language sources are translated; those from English-language sources are transcribed. Except for excluding certain diacritics, FBIS renders personal names and place-names in accordance with the romanization systems approved for U.S. Government publications by the U.S. Board of Geographic Names.

Headlines, editorial reports, and material enclosed in brackets [] are supplied by FBIS/JPRS. Processing indicators such as [Text] or [Excerpts] in the first line of each item indicate how the information was processed from the original. Unfamiliar names rendered phonetically are enclosed in parentheses. Words or names preceded by a question mark and enclosed in parentheses were not clear from the original source but have been supplied as appropriate to the context. Other unattributed parenthetical notes within the body of an item originate with the source. Times within items are as given by the source. Passages in boldface or italics are as published.

SUBSCRIPTION/PROCUREMENT INFORMATION

The FBIS DAILY REPORT contains current news and information and is published Monday through Friday in eight volumes: China, East Europe, Central Eurasia. East Asia, Near East & South Asia, Sub-Saharan Africa, Latin America, and West Europe. Supplements to the DAILY REPORTs may also be available periodically and will be distributed to regular DAILY REPORT subscribers. JPRS publications, which include approximately 50 regional, worldwide, and topical reports, generally contain less time-sensitive information and are published periodically.

Current DAILY REPORTs and JPRS publications are listed in *Government Reports Announcements* issued semimonthly by the National Technical Information Service (NTIS), 5285 Port Royal Road, Springfield, Virginia 22161 and the *Monthly Catalog of U.S. Government Publications* issued by the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

The public may subscribe to either hardcover or microfiche versions of the DAILY REPORTs and JPRS publications through NTIS at the above address or by calling (703) 487-4630. Subscription rates will be

provided by NTIS upon request. Subscriptions are available outside the United States from NTIS or appointed foreign dealers. New subscribers should expect a 30-day delay in receipt of the first issue.

U.S. Government offices may obtain subscriptions to the DAILY REPORTs or JPRS publications (hardcover or microfiche) at no charge through their sponsoring organizations. For additional information or assistance, call FBIS, (202) 338-6735,or write to P.O. Box 2604, Washington, D.C. 20013. Department of Defense consumers are required to submit requests through appropriate command validation channels to DIA, RTS-2C, Washington, D.C. 20301. (Telephone: (202) 373-3771, Autovon: 243-3771.)

Back issues or single copies of the DAILY REPORTs and JPRS publications are not available. Both the DAILY REPORTs and the JPRS publications are on file for public reference at the Library of Congress and at many Federal Depository Libraries. Reference copies may also be seen at many public and university libraries throughout the United States.

END OF FICHE DATE FILMED

30 August 1994